Filing Fee: \$50.00

1669651



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

### **BUSINESS CORPORATION**

## **APPLICATION FOR** RENEWAL OF REGISTRATION OF CORPORATE NAME

Pursuant to the provisions of Section 7-1.2-404 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a renewal of registration of its corporate name extending the registration for a period of one year from the date of expiration of the filing of its original application, or last renewal thereof, and submits the following statement:

| 1.                                    | 1. The name of the corporation is The Accountable Allia                                                                                                                                                                                                                                                                                                                     | ance, Incorporated                                                                                                                                                                                                                                    |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2.                                    | 2. The corporation is incorporated under the laws of                                                                                                                                                                                                                                                                                                                        | laware                                                                                                                                                                                                                                                |
| 3.                                    | 3. The date of its incorporation is                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                       |
| 4.                                    | 4. The corporation is carrying on or doing business.                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                       |
| 5.                                    | 5. The business in which it is engaged is Managed Heal                                                                                                                                                                                                                                                                                                                      | Ithcare                                                                                                                                                                                                                                               |
| 6.                                    | This application is accompanied by (a) a certificate setting forth that the corporation is in good standing under the laws of the state or territory wherein it is organized, executed by the secretary of state of the state or territory or by any other official that may have custody of the records pertaining to corporations; and (b) the required registration fee. |                                                                                                                                                                                                                                                       |
| Da                                    | e><br>Co                                                                                                                                                                                                                                                                                                                                                                    | nder penalty of perjury, I declare and affirm that I have kamined this Application for Renewal of Registration of orporate Name, including any accompanying attachments, and at all statements contained herein are true and correct.  Shureway Darky |
|                                       |                                                                                                                                                                                                                                                                                                                                                                             | Signature of Aethorized Officer of the Corporation                                                                                                                                                                                                    |
|                                       | S                                                                                                                                                                                                                                                                                                                                                                           | Shirley Parks, Assistant Secretary                                                                                                                                                                                                                    |
|                                       | _                                                                                                                                                                                                                                                                                                                                                                           | Type or Print Name of Authorized Officer                                                                                                                                                                                                              |
| Su                                    | Submitted By:                                                                                                                                                                                                                                                                                                                                                               | _                                                                                                                                                                                                                                                     |
| Sh                                    | Shirley Parks                                                                                                                                                                                                                                                                                                                                                               | 5                                                                                                                                                                                                                                                     |
| Name<br>7301 N 16th Street, Suite 201 |                                                                                                                                                                                                                                                                                                                                                                             | 12:47 FILED                                                                                                                                                                                                                                           |
| Address<br>Phoenix, AZ 85020          |                                                                                                                                                                                                                                                                                                                                                                             | NOV 2 6 2018                                                                                                                                                                                                                                          |
|                                       | Form No. 623<br>Revised: 12/05                                                                                                                                                                                                                                                                                                                                              | FILED NOV 2 6 2018 BY AND WHXK7                                                                                                                                                                                                                       |

# Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THE ACCOUNTABLE ALLIANCE,

INCORPORATED" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE

THIRTEENTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE ACCOUNTABLE ALLIANCE, INCORPORATED" WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 1997.

R.I. DEPT. OF STATE BUS SVCS DIV

at corp.delaware gov/au

2710965 8300 SR# 20187485817

Authentication: 203890965

Date: 11-13-18