RI SOS Filing Number: 201915623320 Date: 8/26/2019 12:38:00 PM



REINSTATEMENT

| 1. Entity ID Number: | 2. The name of the entity is: | | | | |
|--|-------------------------------------|--------------------|----------|---------------------|--|
| 000029035 | SMITHFIELD YOUTH SOCCER ASSOCIATION | | | | |
| 3. Date of Revocation: | 4. Reason for Revocation: | | | | |
| 07-31-2019 | Registered Agent | | | | |
| 5. Entity Type: | • | | | | |
| Non-Profit | | | | | |
| 6. The reinstatement includes: | | | | | |
| Annual Reports (# of reports) | | (report filing fee | e) \$ | Total Fees \$ | |
| Penalty fees (# of years) | 1 | (penalty fee) | \$ 25.00 | Total Fees \$ 25.00 | |
| Replacement filing fee | \$ | | | | |
| LOGS (Tax Good Standing) | | | | | |
| Legislative Act/Court Order | | | | | |
| ☑ Change of Agent Form (filing fee) \$ 10.00 | | | | | |
| Change of Registered Office Form - NO FEE | | | | | |
| Certificate of Correction | | | | | |
| Amendment (name change | required) | | | | |
| | | | | | |
| 7. The reinstatement is accomp | anied by: | | | | |
| | | | | | |
| | | | | | |

AUG 2 6 2019

BY QWX4R

FORM 1000 - Rev. sed. 03/2017