Filing Fee: \$150.00 \*

License Fee: \$15.00 minimum (§7-1.1-124)

ID Number: 119791



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

## **BUSINESS CORPORATION**

## APPLICATION FOR CERTIFICATE OF AUTHORITY (To Be Filed In Duplicate Original)

Pursuant to the provisions of Section 7-1.1-103 of the General Laws, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the state of Rhode Island, and for that purpose submits the following statement:

ne name of the corporation is Gilbert C. Oliveira Insurance Agency, Inc. W				
orporated under the laws of				
The name, if different, which it elects to use in Rhode Island is:				
the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company," "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the andings for use in Rhode Island:				
ame is not available in Rhode Island, then set forth below the fictitious name under which the corporation will act business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this				
ation is January 01, 1970 and the period of its duration is 31 years perpotual				
The address of its principal office in the state or country under the laws of which it is incorporated is 1320 North Main Street; Fall River, MA 02720 ( P.O. Box 2031; Fall River, MA 02722)				
osed registered office in Rhode Island is				
(Street Address, not P.O. Box)				
Warwick RI 02903K ()2889 and the name of its proposed registered agent in Rhode Island at				
) /Zin Code)				
жикиных жижих мг. William Nerney				
(Name of Acept)				
(Name of Agent)				
purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
exclusively as an insurance agent, broker,				
tive addresses of the directors and officers are:  Name  Address  Address				
Name Address A				
768957				
Gilbert C. Olive Pa 1 227 Woodlawn St.; Fall River, MA 02720				
Gilbert C. Oliveira, Jr. 1191 Highland Ave.; Fall River, MA 02720				
Gilbert C. Oliveira, Jr. 1191 Highland Ave.; Fall River, MA 02720				
Gilbert C. Oliveira 297 Woodlawn St.; Fall River, MA 02/20				

-	Number of Shares 1000	Class Common	<u>Series</u>	Par Value or Statement that Shares are without Par Value without Par Value
10.	The aggregate number of its issue within a class, is:	ed shares, itemized by cla	asses, par value of shares,	shares without par value, and series, if any,
-	Number of Shares 1000	<u>Class</u> Common	<u>Series</u>	Par Value or Statement that Shares are without Par Value without Par Value
11. (	a) An estimate of the value o \$_50,000	f all property to be ow	med by the corporation f	or the following year, wherever located, is
(	b) An estimate of the value o	f the corporation's prop	erty to be located within	Rhode Island during the following year is
(	<ul> <li>c) An estimate, expressed as a located within this state durin following year, wherever loca</li> </ul>	g the following year bear:	s to the value of all proper	alue of the property of the corporation to be ty of the corporation to be owned during the cultiply by 100 to obtain the percentage].
2 (	a) An estimate of the gross a \$\frac{3,500,000}{}	mount of business to t	pe transacted by the co	rporation during the following year is
(	b) An estimate of the gross a Island during the following ye	mount of business to be ar is \$ 100,000	e transacted by the corpora	ition at or from places of business in Rhode
(	corporation at or from places	of business in this state	during the following year t	nount of business to be transacted by the pears to the gross amount thereof which will ide (b) by (a) and multiply by 100 to obtain
3. 1 I	This application is accompanied by the secretary of state or other a	y certified copies of its a authorized officer of the ju	rticles of incorporation and irisdiction of its incorporation	all amendments thereto, duly authenticated on.
ate:	07/19/2001	-		ira Insurance Agency, Inc.
			Print Exact Name  By July 1	of Corporation Making Application
		•		☐ Vice President (check one)
		8	By Stephents	Livers
			Secretary or	☐ Assistant Secretary (check one)
	TE OF Massachusetts NTY OF Bristol			
s the	In Fall River Te me 5//best 6 Secretary officer of the corporation, and	ive ira of t	he corporation and that herein contained are true_	me first duly sworn, declared that he/she ne/she signed the foregoing document as
			Notary Public / My Commission Expires	: 6/10/05

## RECEIVED

THE COMMONWEALTH OF MASSACHUSETTS

950 15 **1969** 

TO PARTION OWISION TO THE PROPERTY OF THE PROP

ARTICLES OF ORGANIZATION

GENERAL LAWS, CHAPTER 156B, SECTION 12

I hereby cartify that, upon an examination of the within-written agitches of organization, duly submitted to me, it appears that the provisions of the General Laws relative to the organization of corporations have been complied with, and I hereby approve said articles; and the filing fee in the amount of \$ 75.00 having been paid, said articles are deemed to have been fled with me this

Effective data /// /780

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WILLIAM FRANCIS GALVIN SECRETARY OF THE COMMONWEALTH

DATE 7/16/0/ CLERK

TO BE FILLED IN BY CORPORATION

DTO COPY OF ARTICLES OF ORGANIZATION TO BE SENT

Gilbert C. Oliveira

1320 North Main Street

Fell River, Mans.

FILING FEE: 1/30 of 1% of the total amount of the authorized expital stock with per value, and one unit a share for all authorized above without per value, but not less than 97%. Consrel Love, Chapter 1988. Shares of stock with a per value of less than one dellar shall be destroid to have per value of one dellar per share.

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