



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STATE OF RHODE ISLAND
 CORPORATIONS DIV
 2020 JAN -6 PM 12:17

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, 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:

1. The name of the corporation is: ZELHAM, INC.		
2. It is incorporated under the laws of: IDAHO		
3. The name, if different, which it elects to use in Rhode Island is: (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:		
4. The date of its incorporation is: 08/07/2014		
And the period of its duration is: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is: 5257 W FAIRVIEW AVE BOISE, ID 83706 USA		
6. The name and address of the initial registered agent/office in Rhode Island:		
Agent Name COGENCY GLOBAL, INC.		
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard		
City/Town Warwick	State RHODE ISLAND	Zip Code 02888

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Construction Services

8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of the state or country of which it is incorporated):

NAME	ADDRESS
Daniel J Hamilton	5257 W FAIRVIEW AVE BOISE, ID 83706 USA
Edward N Anderson	5257 W FAIRVIEW AVE BOISE, ID 83706 USA

Check the box to indicate an attachment

8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated):

OFFICE	NAME	ADDRESS
PRESIDENT		
VICE PRESIDENT		
TREASURER		
SECRETARY		

Check the box to indicate an attachment

9. The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
5,000	Common		NPV

10. An estimate, as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. (Note: Percentage obtained from worksheet.)

8 %

11. An estimate, as a percentage, of the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. (Note: Percentage obtained from worksheet.)

8 %

12. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

13. Date when the Certificate of Authority will be effective: **CHECK ONE BOX ONLY**

Date received (Upon filing)

Later effective date (Date must be no more than 90 days from the date of filing) _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Authorized Officer

Date

Daniel J. Hamilton

1-6-2020

Signature of Authorized Officer of the Corporation

Daniel J. Hamilton

SIGN DOCUMENT HERE

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



STATE OF IDAHO

Lawrence Denney | Secretary of State
Business Office
450 North 4th Street
PO Box 83720
Boise, ID 83720

December 24, 2019

Request Type: Certificate of Existence/Filing

Issuance Date: 12/24/2019

Request #: 0003715008

Copies Requested: 0

Receipt #: 000270042

Regarding: ZELHAM, INC.

Filing Type: General Business Corporation (D)

File #: 612052

Formation/Qualification Date: 08/07/2014

Status: Active-Good Standing

Formation Locale: IDAHO

Duration Term: Perpetual

Inactive Date:

Certificate of Existence

I, Lawrence Denney, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

ZELHAM, INC.

is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above.

Lawrence Denney
Idaho Secretary of State

2019 JAN -6 PM 12:17
SECRETARY OF STATE
CORPORATIONS DIV

Processed By: Business Division

Verification #: 005484534