



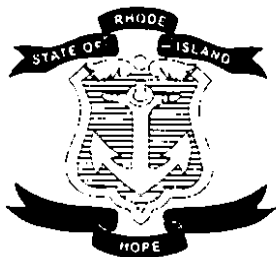
State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

STAMP

# REINSTATEMENT

1. Entity ID Number:  638733	2. The name of the entity is:  The Alpha Group Inc.																																				
3. Date of Revocation:  10-18-2019	4. Reason for Revocation:  Annual Report																																				
5. Entity Type:  Foreign Business Corporation																																					
6. The reinstatement includes: <table border="0"> <tr> <td><input checked="" type="checkbox"/> Annual Reports (# of reports)</td> <td>2</td> <td>(report filing fee) \$ 50</td> <td>Total Fees \$ 100</td> </tr> <tr> <td><input type="checkbox"/> Penalty fees (# of years)</td> <td>1</td> <td>(penalty fee) \$ 50</td> <td>Total Fees \$ 50</td> </tr> <tr> <td><input type="checkbox"/> Replacement filing fee</td> <td>\$</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> LOGS (Tax Good Standing)</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Legislative Act/Court Order</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 20</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Change of Registered Office Form - NO FEE</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certificate of Correction</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Amendment (name change required)</td> <td></td> <td></td> <td></td> </tr> </table>		<input checked="" type="checkbox"/> Annual Reports (# of reports)	2	(report filing fee) \$ 50	Total Fees \$ 100	<input type="checkbox"/> Penalty fees (# of years)	1	(penalty fee) \$ 50	Total Fees \$ 50	<input type="checkbox"/> Replacement filing fee	\$			<input checked="" type="checkbox"/> LOGS (Tax Good Standing)				<input type="checkbox"/> Legislative Act/Court Order				<input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 20				<input type="checkbox"/> Change of Registered Office Form - NO FEE				<input type="checkbox"/> Certificate of Correction				<input type="checkbox"/> Amendment (name change required)			
<input checked="" type="checkbox"/> Annual Reports (# of reports)	2	(report filing fee) \$ 50	Total Fees \$ 100																																		
<input type="checkbox"/> Penalty fees (# of years)	1	(penalty fee) \$ 50	Total Fees \$ 50																																		
<input type="checkbox"/> Replacement filing fee	\$																																				
<input checked="" type="checkbox"/> LOGS (Tax Good Standing)																																					
<input type="checkbox"/> Legislative Act/Court Order																																					
<input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 20																																					
<input type="checkbox"/> Change of Registered Office Form - NO FEE																																					
<input type="checkbox"/> Certificate of Correction																																					
<input type="checkbox"/> Amendment (name change required)																																					
7. The reinstatement is accompanied by:																																					

FILED<sup>c</sup>  
STAMP  
FEB 03 2020  
BY CM 2 DFW4  
12:41



STATE OF RHODE ISLAND AND  
PROVIDENCE PLANTATIONS  
DEPARTMENT OF ADMINISTRATION  
DIVISION OF TAXATION  
ONE CAPITOL HILL  
PROVIDENCE, RI 02908

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV  
2020 FEB -3 PM 12:41

THE ALPHA GROUP INC  
ATTN: JENNIFER CORBY  
61 E MAIN ST STE 1  
NORTON, MA 02766-2317

## LETTER OF GOOD STANDING

It appears from our records that **THE ALPHA GROUP, INC.** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **THE ALPHA GROUP, INC.** is in good standing with the Rhode Island Division of Taxation as of **01/24/2020**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

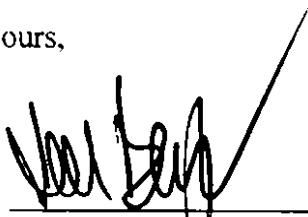
This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.


This letter is issued pursuant to the request of the above-named corporation for the purpose of:

## REINSTATEMENT OF REVOKED CORPORATE CHARTER


This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

  
\_\_\_\_\_  
IAN BEAUREGARD  
Supervising Revenue Officer

  
\_\_\_\_\_  
Neena Savage  
Tax Administrator

042804449:15511300  
DLN: 10007511761

FILED   
FEB 03 2020  
BY On 2DPW4  
12/41