State of Rhode Island and Providence Pl. Department of State - Busine				ZOZO MAR	R.I.
Application for Certificate of A FOREIGN Business Corporation	uthority		STA".	MAR 1	200
→ Filing Fee: \$310.00 minimum				A CS	
Pursuant to the provisions of RIGL <u>7-1.2-1405</u> applies for a Certificate of Authority to transac for that purpose submits the following stateme	t business in the State of Rhode Island	hereby I, and		- 4: 0	ED STATE
1. The name of the corporation is:					-"#-
Michael Bell Electric Com	pany Inc				
2. It is incorporated under the laws of: Manual Manua Manual Manual Manu	assachusetts				
3. The name, if different, which it elects to us	e in Rhode Island is:				
	ation of means anotice during the second second	the word "corporati	ion", "company	/".	
 (a) If the name of the corporation in its jurisdi "incorporated", or "limited," or an abbreviation above corporate endings for use in Rhode Is (b) If the corporate name is not available in R corporation will qualify and transact business filed with this application: 	h thereof, then list the name of the corr land Rhode Island, then set forth below the f	poration with the ad	r which the		
 "incorporated", or "limited," or an abbreviation above corporate endings for use in Rhode Is (b) If the corporate name is not available in R corporation will qualify and transact business 	h thereof, then list the name of the corr land Rhode Island, then set forth below the f in Rhode Island as stated in the "Ficti	poration with the ad	r which the		
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 "incorporated", or "limited," or an abbreviation above corporate endings for use in Rhode Is (b) If the corporate name is not available in R corporation will qualify and transact business filed with this application: 4. The date of its incorporation is: 5-27-2 And the period of its duration is: CHECK ON ✓ Perpetual (on-going) 	h thereof, then list the name of the corr land Rhode Island, then set forth below the f in Rhode Island as stated in the "Ficti	poration with the ad	r which the		
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 "incorporated", or "limited," or an abbreviation above corporate endings for use in Rhode Is (b) If the corporate name is not available in R corporation will qualify and transact business filed with this application: 4. The date of its incorporation is: 5-27-2 And the period of its duration is: CHECK ON ✓ Perpetual (on-going) Date certain for dissolution	n thereof, then list the name of the corr land thode Island, then set forth below the f in Rhode Island as stated in the "Ficti 2014 IE BOX ONLY ered agent/office in Rhode Island:	poration with the ad	r which the		
 "incorporated", or "limited," or an abbreviation above corporate endings for use in Rhode Is (b) If the corporate name is not available in R corporation will qualify and transact business filed with this application: 4. The date of its incorporation is: 5-27-2 And the period of its duration is: CHECK ON ✓ Perpetual (on-going) Date certain for dissolution 5. The address of its principal office is: 60 Evergreen Dr Seekonk MA 02771 6. The name and address of the initial register 	h thereof, then list the name of the corr land thode Island, then set forth below the f in Rhode Island as stated in the "Ficti 2014 IE BOX ONLY ered agent/office in Rhode Island: rvices LLC	poration with the ad	r which the		

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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FORM 150 - Revised 12/2017

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•••	The purpose of purposes which it pi	oposes to pu	uisue in the transactio	n or business in	Rhode Island are

ncorporated to conduct or engage in the electrical contracting and installation work, including but not limited t	D
larm systems	

8. (a) The names and restate or country of whice	espective addre th it is incorpore	esses of its directo ated):	ars (optional, unless dire	rectors are required under the laws of the		
NAME				DDRESS		
Patrick L Boudreau		10 Abbey Ln Re	ehoboth MA 02769			
Michael H Bell		60 Evergreen Dr Seekonk MA 02771				
				Check the box to indicate an attachment		
of the state or country of	espective addre	corporated)	al officers (mandatory i	if directors are not required under the laws		
OFFICE		NAME		ADDRESS		
PRESIDENT	Michael H Be	ell	60 Evergreen [60 Evergreen Dr Seekonk MA 02771		
VICE PRESIDENT	Patrick L Boudreau		10 Abbey Ln R	10 Abbey Ln Rehoboth MA 02769		
TREASURER	Michael H Bell		60 Evergreen C	60 Evergreen Dr Seekonk MA 02771		
SECRETARY	Lisa Macahdo-Bell		60 Evergreen [60 Evergreen Dr Seekonk MA 02771		
				Check the box to indicate an attachment		
9. The aggregate numb par value, and series, if	er of shares wi f any, within a c	nich it has authorit dass, is:		classes, par value of shares, shares without		
NUMBER OF SHARES	CLAS	3S	SERIES	PAR VALUE OR STATE NO PAR VALUE		
1000	CNP			NO PAR VALUE		
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<u>_</u>	·			<u> </u>		
		<u> </u>	<u>_</u>	·		
	·			- <u> </u>		
10. An estimate, as a p located within this state the following year, when	e during the follo	owing year bears to	to the value of all prope	f the property of the corporation to be erty of the corporation to be owned during eet.)		
0			oolumou nelli tiettiettie	ю.у		
%)					
11. An estimate, as a p at or from places of bus transacted by the corpo	siness in Rhode	e Island during the	following year compare	siness to be transacted by the corporation red to the gross amount thereof which will be ained from worksheet)		
<u>43</u> %		10 101011119 J 0 211 (nole, r croemage esta	med nom workaneer.y		

12. This application must be accompanied by a <u>Certificate of Good S</u> formation dated within 60 days of the date of this filing.	tanding/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective: CHECK O	NE BOX ONLY
Date received (Upon filing)	
Later effective date (Date must be no more than 90 days from th	e date of filing)
Under penalty of perjury, I declare and affirm that I have examined th accompanying attachments, and that all statements contained herein	is Application for Certificate of Authority, including any are true and correct.
Type or Print Name of Authorized Officer	Date
Patrick L Boudreau	3-10-2020
Signature of Authorized Officer of the Corporation	नः://

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The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachuseus 02188

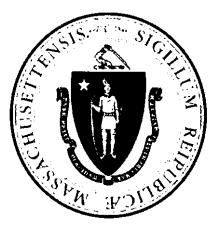
William Francis Galvin Secretary of the Commonwealth

Date: March 09, 2020

To Whom It May Concern :

I hereby certify that according to the records of this office, MICHAEL BELL ELECTRIC COMPANY, INC.

is a domestic corporation organized on **May 27, 2014**, under the General Laws of the Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which, I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

Villean Tranino Galecin

Secretary of the Commonwealth

Certificate Number: 20030196520 Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx Processed by: bod



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

March 13, 2020 09:05 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

