

## R.I. DEPTAGE ST BUS SYES OF ST SEP - 8 PK I

### **Application for Certificate of Authority**

**FOREIGN Business Corporation** 

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1,2-1405</u>, 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:

for that purpose submits the following statement:		
The name of the corporation is:		
Correira Law, Inc.		
2. It is incorporated under the laws of: Massach	usetts	
3. The name, if different, which it elects to use in Rh	ode Island is:	-
(a) If the name of the corporation in its jurisdiction o "incorporated", or "limited," or an abbreviation there above corporate endings for use in Rhode Island:	f incorporation does not contain of, then list the name of the corp	the word "corporation", "company", oration with the addition of one of the
(b) If the corporate name is not available in Rhode Is corporation will qualify and transact business in Rhofiled with this application:		
4. The date of its incorporation is: August 7, 20	20	
And the period of its duration is. <b>CHECK ONE BOX</b> Perpetual (on-going)	CONLY	
Date certain for dissolution		
5. The address of its principal office is:		
1010 G.A.R. Highway, Swansea, Massachusetts	02777	
6. The name and address of the initial registered ag	ent/office in Rhode Island:	
Agent Name Paula M. Cuculo		
Street Address (NOT a P.O. Box) 1525 Old Louisqu	uisset Pike, Suite B205	
City/Town Lincoln	State RHODE ISLAND	Zip Code <b>02865</b>

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 0 8 2020

SEP 0 8 2020

FORM 150 - Revised. 12/2017

7. The purpose or purp	oses which it p	roposes to pursue in th	ie transaction of b	pusiness in Rhode Island are:	
Providing legal services to its clients within the State of Rhode Island and in all jurisdictions in which its attorneys					
are duly licensed and				-	
0 (-) The manner and m	-4'	t A. Carabana (a			
8. (a) The names and restate or country of which			optional, unless di	rectors are required under the laws of the	
NAME			AI	DDRESS	
Eric D. Correira 40 Jakes Way, M		40 Jakes Way, Mans	sfield, Massachu	setts 02048	
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<u> </u>			· <u>·</u>	· · · · · · · · · · · · · · · · · · ·	
<del></del>		1	<del></del>	Check the box to indicate an attachment	
			 ficers (mandatory	if directors are not required under the laws	
of the state or country of	of which it is inc	<u> </u>	<u> </u>		
OFFICE	<del> </del>	NAME	<del>- </del> -	ADDRESS	
PRESIDENT	Eric D. Corr	eira	40 Jakes Way	, Mansfield, Massachusetts 02048	
VICE PRESIDENT	Eric D. Corre	eira	40 Jakes Way	, Mansfield, Massachusetts 02048	
TREASURER	Eric D. Correira		40 Jakes Way.	, Mansfield, Massachusetts 02048	
SECRETARY	Eric D. Correira		40 Jakes Way	40 Jakes Way, Mansfield, Massachusetts 02048	
	. <del>L</del>		<del></del>	Check the box to indicate an attachment	
<ol><li>The aggregate numb par value, and series, if</li></ol>			issue; itemized by	classes, par value of shares, shares without	
NUMBER OF SHARES	CLAS	- SS	SERIES	PAR VALUE OR STATE NO PAR VALUE	
50	Common			No Par Value	
<del></del>		<del></del>		_	
	-				
				of the property of the corporation to be erry of the corporation to be owned during	
the following year, wher					
0 0				·	
%	1				
at or from places of bus	siness in Rhode	e Island during the follo	wing year compa	usiness to be transacted by the corporation ared to the gross amount thereof which will be	
transacted by the corpo	ration during ti	ne following year. (rvote	) Регсептаде овт	ained from worksneer j	
<u>2</u> %	<del>2</del> ————————————————————————————————————				

12. This application must be accompanied by a <u>Certificate of Go</u> formation dated within 60 days of the date of this filing.	od Standing/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective. CHEC	K ONE BOX ONLY
✓ Date received (Upon filing)	
Later effective date (Date must be no more than 90 days fro	m the date of filing)
Under penalty of perjury, I declare and affirm that I have examine accompanying attachments, and that all statements contained he	
Type or Print Name of Authorized Officer	Date
Eric D. Correira	9/3/20
Signature of Authorized Officer of the Corporation	NT HERE



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

August 20, 2020

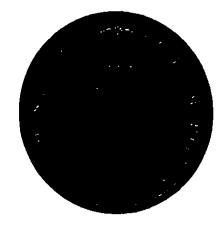
TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

#### **CORREIRA LAW INC**

is a domestic corporation organized on **August 7, 2020**, 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.



Processed By: NGM

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Mein Travin Galicin



# Supreme Court of Rhode Island Providence

## The State of Rhode Island

This Certifies that

## Eric D. Correira

of Providence, RI

is an Attorney and Counselor of the Supreme Court of the State of Rhode Island, and as such was on the 15th day of December, 2009 admitted to practice in all the courts of said state as appears of record in the Office of the Clerk of the Supreme Court and is in good standing and qualified to practice in said courts.

Given under our hands and the seal of said Supreme Court at Providence this the 12th day of August, 2020.

Debn a Saunders\_