

REINSTATEMENT

STAMP

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1 Entity ID Number:	2. The name of the entity is:			
000030188	TOTS' COOPERA	TIVE NURSERY	Y SCHOOL,	INC.
3. Date of Revocation:	4. Reason for Revocati	on.		
01/15/2020	Annual Report			
5. Entity Type:		_		
Non-Profit				
6. The reinstatement includes:				
Annual Reports (# of reports	s) 2	(report filing fee)	\$ 20	Total Fees \$ 40
Penalty fees (# of years)	1	(penalty fee)	\$ 25	Total Fees \$ 25
Replacement filing fee	\$			
LOGS (Tax Good Standing)				
Legislative Act/Court Order				
Change of Agent Form (filing fee) \$				
Change of Registered Office Form - NO FEE				
Certificate of Correction				
Amendment (name change required)				
7. The reinstatement is accompanied by:				

FILED

NOV. 1 \$ 2020 A MP

BY 537 F



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

2020 NOV 17 P 2: 48

RECEIVED

TOTS COOPERATIVE NURSERY ATTN: CHRISTINE RAPOSA **461 COUNTY RD BARRINGTON, RI 02806-2423**

工:0#30188

LETTER OF GOOD STANDING

It appears from our records that TOTS' COOPERATIVE NURSERY SCHOOL, INC. has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. TOTS' COOPERATIVE NURSERY SCHOOL, INC. is in good standing with the Rhode Island Division of Taxation as of 03/23/2020. 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,

Supervising Revenue Officer

Neena Savage

Tax Administrator

FILED

050400059:15941175 DLN: 10007835638