

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January (FORM MUST BE 1YPED OR	1 - March 1 💮 🔸 👚	Filing Fee: \$50.00	KI FOR THE YEA	AR		
1. Corporate ID No.	2. Name of Corp					
7095 3. Street Address Principal Busi	MARION I	MFG. CO.				
87 Corliss Street			City	State	Zip	
4. Business Phone No.	<u>Jereer</u>	5. State of Incorporation	Providence	R.I.	02904	
(401) 331-4343 RHODE ISLA						
7. Brief Description of the Character of Business Conducted in Rhode Island MANUFACTURER OF CUSTOM WINDOW TREATMENTS.)		679	
8. NAMES AND ADDRES	SSES OF THE OFFI	CERS: ("X" BOX FOR AT	TTACHMENT) FILL IN	SPACES BEFORE USING	ATTACHMENTS	
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File Date	25-05		contained beroin asc	Transing schedules and staten	nents, and that all statements $\frac{1}{20/2005}$	
Check No	250		Signatur of Officer JOR G	E A MEDEIRO	Date	
Ву:	مار	_	Print or Type Name of	f Officer	/ 0	
FOR SECRETARY O	F STATE USE ONLY		Title of Officer			



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222-3040

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Brief Description of the C	baracter of Business Conduct	ed in Rhode Island	AND	·	- 679
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	1-27-04
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By:	<u> </u>
FOR S	ECRETARY OF STATE USE ONLY

Undof Dena	Ity of perjury, I declare	and affir	m that I have examined this report.
including a	ny accompanying schoo	dules and	statements, and that all statements
A.	JHU,	~	_ 1/23/2004
Signature of	-		Dyle
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Print or Typ	e Naude of Officer		
Title of Office	WILES.		



Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PHASE READ INSTRUCTIONS

(FORM MUST BE TYPED OR PRINT) 1. Corporate II) No.	ED IN BLACK) 2. Name of Corporation	, -			
7095 3. Street Address Principal Business (MARION MFG		[†] Člíy	[†] State	Zip
4. Business recordiss Stre	eet	5. State of Incorporation	Providence	RI	03904,
7. Brief De Clipton Frihe Character	of Business Conducted in F	RHODE ISLAND			679
8. NAMES AND ADDRESS President Name	Treatments and	Bedding	MENT) FILL IN SPACES BE	FORE USING ATTACH	IMENTS
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66 Farnum Sti	reet State	Zip	66 Farnum Stree	t State	Zip
Ea. Providence Secretary Name	RI	.02914	Ea. Providence . Treasurer Name	RI	02914
Street Address			Street Address		
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9. NAMES AND ADDRESS Director Name	SES OF THE DIREC	TORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Director Name	BEFORE USING ATTAC	CHMENTS
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his report must be signe	d in ink by either	the President, Vice P	resident, Secretary, Assista	nt Secretary, Treasur	er, Receiver or Truste

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File Date: 5702

By: ______

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained berein are true and correct.

Signature of Officer

Print or Type Name of Officer

Title of Officer

Form 630 12/02



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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1. Corporate ID No.	7) 2. Name of Corporation	· ———			
7095	MARION MFG.				
3. Street Address Principal Business Off	lice		· CII)·	State	Zip
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his report must be signed	in ink by either	the President, Vice Pr			Receiver or Tr



 Under penalty of perjuty, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer Date

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Title of Officer

Farm (30 17/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID 7095 MARION WEG. CO.

3. Street Address Principal Business Office City State 87 Corliss Street, Providence, RI 02904 2. Riley Description of the Character of Rusiness Conducted in Rhode Island

Manufacturer of custom window treatments, 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Jorge Medeiros Maria T. Medeiros Street Address 66 Farnum Street 66 Farnum Street Zip City ZIp Ea; Providence RI 02914

Ea. Providence RI 02914 Secretary Name Treasurer Name Street Address Street Address City City State 7.10

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name

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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED) SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series

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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined including any accompanying schedules and statements, and are true and correct. File Date: Date Print or Type Name of Officer FOR SECRETARY OF STATE USE ONLY

Par Value

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James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000 Filing Period: January 1-March 1 · Filing Fee: \$50.00



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er of Custom	Window Treatments ICERS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES BE Vice President Name	FORE USING ATTA	CHMENTS
		Maria T. Medeiros		
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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FOR SECRETARY O	F STATE USE ONLY	•

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

TOROK A MEDGIROS

Print or Typ Name of Officer

Paes



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

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7095	2. Name of Corporation MARION MFG				•
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387. Charles	Street		Providence.	RI	02904
		5. State of Incorporation 116			6. SIC Code
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Manufacturer_of	Custom Drap	eries and Windo	W-Treatments, Access	ories	
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Jorge Medeiros.			Maria_T Medeiro	os 	-
66 Farnum Stree	t		66 Farnum Street	•	
	State	Zip	City	State	Zip
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File Date Fob 4, 99	this support, including any accompanying schedules and statements, and that his statements conthined herein are true and correct.
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FOR SECRETARY OF STATE USE ONLY	PRES.
	Title of Officer



(FORM MUST BE TYPED IN BLACK)

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

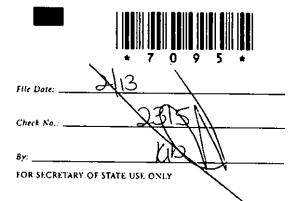
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1-March 1 • Filing Fee: \$50.00

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1. Corporate 1D No.	2. Name of Corporati	on	· -		
3. St ZO85 tress Principal Busine.	ss officMARION MF	G. CO.	City	' State	Zip
4. Business Phone Charles	Street	5. State of incorporation	Providence	RI	02904 6. SIC Code
7. Brief best Aption of 3.3 Charact	त्र के Business Conducted in	Rhode IRHODE ISLAND)		0679
8. NAMES AND ADDRE	SSES OF THE OFFIC	CERS (*x* box for attaci	IMENT) Vice President Name		-· ·
Jorge Medei Street Address	ros		Maria T. Med	eiros	
_{City} 66 Farnum S	treet	Zip	cm66 Farnum St	reet	Zip
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

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Signature of Oliker Date

Print or Type Name of Officer

PRESIDENT



FOR SECRETARY OF STATE USE ONLY

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

illing Period: January FORM MUST BE TYPED IN BLA		Filing Fee: \$50.00			INSTRUC BUI'C COMPL
Corporate ID No.	2. Name of Corpora	lion .			THIS C
7095	1	MFG. CO.			
Street Address Principal Rusiness			City	State	Zip
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Business Phone No.		5. State of Incorporation		——————————————————————————————————————	6. SIC Code
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www. Witt	ጓ	•	Signature of Office		Date /
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1(1V)		•	Print or Type Name of Off		
			,,		

PRESIDENT

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

1. CORPORATE ID NO.	2 NAME OF CORPORATION	PLEASE TYPE OR	PRINT IN BLACK INK.		
7095 3. STREET ADDRESS PRINCIPAL BUSINESS OFF	MARION	MFG. CO.			
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401-331-434 7. BRIEF DESCRIPTION OF THE CHARACTER OF B	3				0679
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PRESIDENT HAME	5. NAM	ES AND ADDR	ESSES OF THE OFF	ICERS	
Jorge_Medei	ros		Maria T Mode	ni maa	•
1			Maria_TMede		
66 Farnum S	STATE	T ZIP COD€	66 Farnum Sti	reet	
Ea. Prov.	R.I.	02914	Ea. Prov.	R.T.	2P 000€ 02914
SECRETARY MAME			TREASURER NAME		02314
STREET WOOMS T-i-a-TMe	dei-ros		Jorge_Medeiro	o.s	
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STREET ADDRESS	9		STREET ADORESS		· · · · · · · · · · · · · · · · · · ·
OTY .	T STATE	Tanana.			_
	STATE	ZIP CODE	ατν	STATE	ZIP CODE
DIRECTOR NAME	<u></u>	<u></u>	CERECTOR HAVE		
STREET ADDRESS					
STREET AUUTESS			STREET ADDRESS		
ดา	STATE	ZP 0005	ary	STATE	25° 500£
		1			
	10. SHA	RES AUTHOR	IZED AND ISSUED		
MUMBER OF SHARES	AUTHORIZED SHARES			ISSUED SHARES	
MINISCH UT STORES	CLASS / SERIES	PAR VALUE	MUMBER OF SHARES	CLASS / SERVES	PAR VALUE
500 SHS NO I	PAR COM		100		No Par
	-··		<u> </u>		
<u>. </u>					
					_l
Presid	Inis re lent Vice President	port must be SIG	NED IN INK by either, the		
	ion, vice i resident	, Secretary, Assist	tant Secretary, Treasurer, R		
			Under penalty of preport, including after	erjury, I declare and a	affirm that I have examined this edules and statements, and that
	;		all statements cont	alned herein are true	and correct.
File Date: 2/8/6	76		<u> </u>	~ led	en
File Date: 2/8/6			Signature of Office	1	
Check No: . /05	, ,		Jon	CE A MES	D61001
. (,,		_	Print or Type Name	of Officer	
By:			Th.	with	2/8/96
For Secretary of Sta	te Use Only		Title of Officer		Date

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401 277-3040

Ch# 3/25

ANNUAL REPORT

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ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID:			Annual Report for the	1995	
Name of Corporation:	ARION MFG. CO		, , , , , , , , , , , , , , , , , , ,	y	
Business entity organized under the laws of For foreign entity, address and telephone r	number of principal office:			check one): oration (See RIGL Chapter 7-1.1) ervice Corporation (See RIGL Ch	
			Brief statement of the	he character of business conducted	I in Rhode Island:
Address and telephone of the principal off Island (Provide street address - Not P.O. B387-Ghar-les-StreetProvidence, -RI02	ice of business entity in Ricox):	hixde	Manufactu draperies	rer of custom mades.	le
Phone: (401)-331-4343					
	THE NA	MES OF TH	E OFFICERS ARE:		
PRESIDENT		STREET ADDR	RESS	CITY/STATE	ZIF CODE
Jorge Medeiros VICE PRESIDENT MaRIE T. Medeiros	66_Farnum_ Same	St East STRFET ADOR	Providence,	- R I 02914	NIB CODE
SECRETARY		STREET ADDR	RESS	CH Y/STATE	ZIP CODE
Marie T. Medetros	Same	STREET ADDR	RESS	CITY/SEATE	ZiP CODE
Jorge Medeiros	<u>Same</u>				/2/ C.CDE
NAME	THE NAM	4ES OF THE STREET ADDR	E DIRECTORS ARE	CHY/STATE	Zip CODE
Jorge Medeiros 66 Fa	arnum St., Pro	ovidema	B, R.I. 029]	4	
Marie T. Medeiros	Same	STREET ADDS	uss	CITY/STATE	A18 CODE
NAME		STREET ADDR	n.ss	CHYSTATE	ACODE
NUMBER OF SHARES AUTHORIZED (Ri	der may be attached)	· 	NUMBER OF SHARES I	SSUED AND OUTSTANDING (Rid	er may be attached)
Number of Shares Class /	Series		Number of Shares	Class / Series	<u> </u>
500			100		
Date	19 <u>_9\$</u>	By:		Dele.	
Form 31 1/95		PRINT OR TYP	F NAME OF OFFICER SIGNING	Jorge Medeiros	
DE	SIGNATED REGIST		<u></u>	Treasurer OF PROCESS;	
PLEASE NOTE: If the registered office a		· · · · · · · · · · · · · · · · · · ·			

JORGE MEDEIROS 587 CHARLES STREET/MARION MFG. CO. PROVIDENCE RI 02904 JAN 1 8 1895 MARC

SECY OF STATE

Filing Fee \$50.00 Payable to Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State File Annually LLC, Sept. 1 - Nov. 1 CORP, Jan. 1 - March 1

100 North Main Street Providence, Rhode Island 02903-1335 401 277 3040

Corporate ID 0007095	Annual Report for the year 1994
Name of Business Enuty.	MARION MFG CO
Bosiness entity organized under the laws of the State of R I	Business Entity is (check one).
Federal Taxpaver Identification Number	(X] Business Corporation (See RIGL Chapter 7-1-1)
For fereign entity, address and telephone number of principal office	[] Professional Service Corporation (See RIGL Chapter 7-5-1) [] Limited Liability Company (See RIGL 7-16)
The face governing, makes we make a supposite an accept to process context	Name, title and mailing address of contact person to whom
	communications may be directed. Jorge Nedcitos Pres
Phone (1 ,	East Frovidence R 102914
Address and telephone of the principal office of business entity to Rhode.	
Is and (Provate street address - Not P.O. Box)	Buckstatement of the character of business conducted in Rhode Island Mfg Custom Hade Draporios
387 Charles St	
Providence R I 02003	Date of Organization
Phone (-1401) 331 143143	Date of Qualification to do business in Rhode Island (if foreign entity).
	GOT THE OFFICERS ARE: CHARLE ZILCOIN
. <u> </u>	arnum St. E.Providênce R. I. 02914 THITANNESS CHASTA : ZIRĞER. Same
□ CESTICIANO R. CORDNOS. S. SECRETARS (CNA GA) S.	TUD'NY ZANGATI ZANGATILE
	SAMO CONTRACT CONTRACT APPROXI
Jorge Tedeiros	SAME
	OF THE DIRECTORS ARE: 'St 'E, Providence R I 0 2214
No. Parie T. Medeiros	RELEASORS CONTAIN Z COD
san	GREATINGS CONSTAIL ZAPOUR
NUMBER OF SHARES AUTHORIZED (II Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 500	NUMBER 100
CLASS	CLASS
SERIES	SERIES
PAR VALUE OR No Par WITHOUT PAR	PAR VALUE OR NO Par WITHOUT PAR
	" La Coled.
FILED	Horge Medeiros
FEB 1.5 (99)	Treas
10m31 134 By WW 3611	THE BOOK TWO DISTRIBUTIONS

PLEASE NOTE. If the Corporation has changed its registered office and/or registered or resident agent, form 9 or Form LLC 3 must be filted

State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

7095 Corporate ID		Annual	Report for the yea	1993
FIRST: The name of the c				
SECOND: It is incorporate			••••••	
THIRD: Character of busin	ness, briefly stated, is	Manufacturi	ng custom di	raperies
FOURTH: If foreign corpo	ration, address of its	principal office		
FIFTH: Business address in	n Rhode Island Providence		t	•
SIXTH: Names and addres	• • • • • • • • • • • • • • • • • • • •			(Attach rider if necessary)
Name Jorge Medeiros	Office		Address (including number, um St. E.Pro	sreet zip code) ovidence RI 02914
Marie T.Medeiro	Director		same	
	Director	••••••		
Jorge Medeiros			same	
Marie T.Medeir	∩ 5		same	
Marie T.Nedeir	os Secretary	*************************	same	
Jorge Medeiros	Treasurer	,	same	•••••
SEVENTH: Number of Sha	ares authorized:	Series		Par Value or statement that shares are without par value
500			V	lo Par Value
		Rec'd & Filed	MAR 0.8 1993	
EIGHTH: Number of Shar No. of Shares 200	es issued:	Series	AMA 79	Par Value or statement that shares are without par value To Par Value
March 1,1993		Mario	on Mfg Co	
Dated	19	(Name of Corporation) By Pr	esident	
(Report must be signed b	y an officer)	Title		••••••••••••••••••

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

Corporate ID 0007095	Annual Report for the year 1282
FIRST: The name of the corporation is	MARION MEG. CO.
SECOND: It is incorporated under the law	vs of R I
THIRD: Character of business, briefly stat	ed, is Manufacturing Custom Draperies
FOURTH: If foreign corporation, address of	of its principal office
FIFTH: Business address in Rhode Island	951 No Main St Providence R I 02904
Jorge Medeiros	Office Address (including number, street, zip code)
Marie Eedeiros Direc	66 Fornum Ct. Fort Providence
Marie Medeiros Secre	President
Seventh: Number of Shares authorized: No of Shares 100	Par Value or statement that shares are without par value Par Value Or statement that shares are without par value None
EIGHTH: Number of Shares issued: No. of Shares Class	JAN 3 0 1992 SEC'Y OF STATE Series Par Value or statement that shares are without par value
100 1/23/92 Dated19	Marion Mfg Co
(Report must be signed by an officer)	(Name of Corporation) By Title President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

Corporate ID	•••••••	Annual Re	port for the ye	ar1991	
FIRST: The name of the corporation	on is	MARION MEGCO.			
SECOND: It is incorporated under	the laws of	Rhode	Island		
THIRD: Character of business, brie	efly stated, is	Nanufac	turing Cu	stom Draperies	
FOURTH: If foreign corporation, a	ddress of its pr	incipal office			
FIFTH: Business address in Rhode	Island 95	ol No Main St	02904	Providence	
SIXTH: Names and addresses of its	Office	Addr	ess (including numbe		
Jorge Medeiros Maria T Medeiros	Director Director	Same	Cast Frov	idence R I 02914	
Jorge Medeiros	Director	san	ne		
Maria T Medeiros		nt sam	е		
Maria T Medeiros	Secretary	sam	e		
Jorge Medeiros	Treasurer	sa	me		
SEVENTH: Number of Shares authors No of Shares Class	orized:	Series		Par Value or statement that shares are without	
100			PAID	no par value	
Еюнтн: Number of Shares issued	:	.101 SEC'Y	PAID ^{V 1 1} 1991 Of State	Par Value or statement that	
No of Shares Class 100		Series	STATE	shares are without par value no par value	
1/7/91 Dated 19		Marion Marion	Mfg Co.		
	B;	\$ h !	yfed		
(Report must be signed by an office	er) Ti	itle Presid	ent		

State of Rhode Island and Providence Plantations

Corporate ID.	0007095	••••••	Α	nnual Report	t for the year!	. <u>550</u>
First:	The name of the corporat	tion is	MARION	√.MĘGCO	•••••••••••••••••••••••••••••••••••••••	
Second:	It is incorporated unde	r the laws of	Rhode	e Island		
THIRD:	Character of business, br	riefly stated, is	Manuf	acture c	ustom drap	peries
Fourth:	If foreign corporation,	address of its	principal offi	ce		
Г І Г ТН:	Business address in Rhod	e Island	951 Nc	Main St	•••••••••••••••••••••••••••••••••••••••	
		Provider	nce R I	Ø 9 xx2g	02904	
Ѕіхтн:	Names and addresses of i	ts directors ar	d officers:	Address (11	ncluding number, street	(Attach rider if necessary)
Ma:	xwell Morgan	Director	15 Shef	field Av	e Pawt ú cke	t RI 02860
E.B	arbara Morgan	Director	15 Shef	field Ave	e Pawtucke	t R I 02860
***************************************		Director			•••••	
Ma	xwell Morgan	President	**********			
EI	Bar b ara Morgan	Vice Presid	dent			
Mag	KwellMorgan	Secretary			•	•••••••••••••••••••••••••••••••••••••••
E B	rbara Morgan	Treasurer	*************			
Seventh:	Number of Shares aut	horized:				Par Value
No. of Sha	res Clas	s		Series		or statement that shares are without par value
500				G _C	1	yar tanac
Еідятн: 1	Number of Shares issue	d:			PAID	Par Value or statement that
No of Shar		s		Series JA	N I 1 1930	shares are without par value
100				SEC	N 1 1 1990	100
Dated 1/15	//90 19)		arion Mfg		
			(Name of Corpora	evrud	Mar.	en
(Re	port must be signed by an offic	cer)	Title	B	Ne	
Form 31 1/85				,		

State of Rhode Island and Providence Plantations

Corporate ID	7035 	Annual Report for the ye	1989 ar
	f the corporation is	MARTON MEA AN	
SECOND: It is incorp	porated under the laws of	Rhode T sland	
THIRD: Character o	f business, briefly stated, is	Manufacturing Drap	eries
FOURTH: If foreign	corporation, address of its pr	incipal office	
FIFTH: Business add	ress in Rhode Island	951 No Main St Provide	ence 02904
Name	addresses of its directors and	Officers: Address (including number	(Attach rider if necessary)
Maxwell Morgar	Director	15 Sheffield Ave Paw	rtucket R I 02860
E Barbara Morga	n Director	Same	
	Director		
Maxwell Morgan	President	Same	
······	Vice Presider	nt	
Maxwell Morgan		Same	•
E Barbarā Morg	•	Same	
SEVENTH: Number of	of Shares authorized:	PAID	Par Value
No of Shares	Class	ह्निस्ट २ १५४५	or statement that shares are without par value
500		SEC'Y OF STATE	No Par
Eighth: Number of	Shares issued:	h	Par Value or statement that
No. of Shares	Class	Series O	shares are without par value
200			No Par
Feb.1,1989	19	Marion Fig Co	
(Report must be sig	Ву	tle. Pusiful	løge-

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL. PROVIDENCE, RHODE ISLAND 02903

rporate ID 3095		Annual Report for the year		
FIRST: The name of the corporation is		MARTIN MER, CO.		
SECOND: It is incorporated und	er the laws of	Shear	n laland	
THIRD: Character of business, briefly stated, is				
Fourth: If foreign corporation	, address of its princ	cipal office.		
FIFTH: Business address in Rho	de Island	951 North Main St P	tovidence 02904	
SIXTH: Names and addresses of	its directors and off	licers: Address (including nui	(Attach rider if necessary)	
Maxwell Morgan	Director	15 Sheffie	ld Ave Pawtucket R	
E Barbara Morgan	Director	Samo	e _	
	Director	1 N 1 1		
E Barbara Morgan	President	Same	<u></u>	
			ž	
Maxwell Morgan	Vice President.			
E Barbara Morgan	Secretary			
D Daibara Morgan	Treasurer .	Same		
SEVENTH: Number of Shares au	thorized:		Par Value	
No. of Shares Cla	155	Series	or statement that shares are without par value	
500	-	a .a	No	
	[#] 186	PAID		
EIGHTH: Number of Shares issue	ed: CEB 1	PAID FEB 3 1988 SEEN OF STATE	Par Value	
No. of Shares Cla	The Care	OF STATE	or statement that shares are without	
200		SEO	par value No	
Jan.28,1988 d1	9	Marion Mfg Co		
		e of Corporation)		
	Ву	EBarbar,)	ua je-	
(Report must be signed by an off	icer) Title	President		

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

FIRST: The name of the corporati			•••••••••••••••••••••••••••••••••••••••
Second: It is incorporated under	the laws of	Rhode Island	
THIRD: Character of business, brid			
		•••••••••••••••••••••••••••••••••••••••	
FOURTH: If foreign corporation, a	ddress of its princip	al office	
FIFTH: Business address in Rhode	Island 951	. No Main St ^P ro	ovidence R I 02904
SIXTH: Names and addresses of its	s directors and office	•	(Attach rider if necessary)
E Barbara Morgan	Director	15 Speffield	Ave Rawtucket R I 02
Maxwell Morgan	Director	, Sam	16
	Director	•••••	
E Barbara Morgan	President	·····	
	Vice President		
E Barbara Morgan	Secretary	Same	
E Barbara Morgan	Treasurer	Same)
SEVENTH: Number of Shares auth No. of Shares Class	orized:	6 .	Par Value or statement that shares are without
X98 X 500		Series PAID	par value No Par
Еіднтн: Number of Shares issued	PAID	JAN 1 4 1987	
No. of Shares Class	IANT THEY	GECY OF STA	Par Value or statement that shares are without par value
200	الدائه اللا لايمان	rž	No Par
1/13/87 ed19	MAR 2	EMarion Mfg Co	•
Jan 23 Ent	(Name of	Corporation) Ref. J. M.	en eu

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

orporate ID 7095		Annual Report for the year 1986 W MFG, CO.		
	ation is spiritor	A PEG, CO,		
SECOND: It is incorporated und	der the laws of	Rhode Island		
THIRD: Character of business,	briefly stated, is	Manufacturing C	ustom Made Draperies	
FOURTH: If foreign corporation	1, address of its prin	cipal office		
FIFTH: Business address in Rho	ode Island	951 No Main St	Providence RI 02904	
SIXTH: Names and addresses o	Office ()		(Attach rider if necessary) number, street, zip code)	
	Director			
	Director	••••••		
E Barbara Morgan	President	15 Sheffield Av	ve Pawtucket R I 028	
Michael J Morgan	Vice President	26 Morgan Circ	cle Ampherst Mass Ol	
E Barbara Morgan	Secretary		Ave Pawt. RI 02860	
E Barbara Morgan	Treasurer	15 Sheffield A	lve Pawt RI 02860	
SEVENTH: Number of Shares au	thorized:		Par Value or statement that	
No. of Shares CI	01/16/86	Series	shares are without par value NO	
EIGHTH: Number of Shares issu	ed: PAID	83.	Par Value or statement that	
	ass	Series XX	shares are without par value	
200	ANRE CHEK 0217A001	\)\ No	
ed 1/10/86	9	Marion Mfg Co.		
	⇔ ⊃ By	Dasay Ma	21 Can	

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID ⁷⁰⁹⁵		Annual Report for the year
FIRST: The name	of the corporation is MARI	ION MFG. CO.
SECOND: It is inco	orporated under the laws of	Rhode Island
THIRD: Character	of business, briefly stated, is	Manufacture Custom Draperies
FOURTH: If foreig	n corporation, address of its	principal office
FIFTH: Business ac	ddress in Rhode Island	
		Providence R I 02904
Sixth: Names and Name Maxwell Morga	d addresses of its directors an Office an	nd officers: (Attach rider if necessary Address (including number, street, up code) 15 Sheffleld Ave Pawtucket R I 0286
E Barbara Mon	gan Director	Same
E Barbara Mo	Director	II
Michael J Mc	organ	dent 26 Morgan Circle Amherst Mass
E Barbara M	Vice Presiden Secretary	dent
E Barbara M	•	
SEVENTH: Numbe	r of Shares authorized:	Par Value or statement that
No. of Shares	Clex	Senes she without par value NO
Еіднтн: Number	of Shares issued:	Par Value or statement that
No of Shares 100	Class	shares are without Series par value NO
2/1/85 Dated	19	Marion Mfg Co
	40	(Name of Corporation)
(Report must be	signed by an officer)	By Esasam Morgan Title President
form 31 - 1/85		

MARION MFG. CO. E. BARBARA MORGAN 951 NORTH MAIN STREET PROVIDENCE RI ANRE 1 CHEK 1 02/13/85 PAID 0503A001

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations Office of the secretary of state

			Annual Report for the y	ear	1984	
First:	The name of th	e corporation	n is			
		n Mfg Co.				
SECOND:			he laws of Rhode	I k lan	d	
_	-					
THIRD:		isiness, brieti ufacture D	*			
-			. , .			
Fourth	: If foreign co	orporation, a	ddress of its principal of	fice		
			· · · · · · · · · · · · · · · · · · ·			
Fifth:	Business addre	ss in Rhode	Island			
	951 N	o Main St	Providence 02904			
Sixth:	Names and add	dresses of its	directors and officers:			
	(Addresses must	include street	and number, if any)			
ì	Name	Office	A d	dress		
Maxwell	Morgan	Director	15 Sheffield	Ave	Pawtucket	RI
E Barb	ara Morgan	Director	15 Sheffield	Ave	Pawtucket	R I
		Director				-
Michael	Morgan	President	26 Morgan C	ircle	Amherst M	A
		Vice Pres	ident			
E Barba	ara Morgan	Secretary				
	ara Morgan space is needed, a	Treasurer			5	
SEVENTH	: Number of	Shares auth	orized:		r Value	
No. of Shi	nres	Class	Series	shares	itement that are without ir value	
199	50 0			ľ	No Par	
Eighth: No. of Sha 100		Shares issued	l: Series	or stn shares pa	ar Value stement that are without ar value No Par	
Dated: 1/	126/84 SM	\$391E14	Marion Mfg (Name of Corporation) By SaJa. Title Treas (Report must be sign	mo	officer)	,

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

	An	nual Report for the y	ear
FIRST: The name of th	e corporation is	Marion Mfg C	o
	•		
SECOND: It is incorpor	ated under the la	ws of RI	
THIRD: Character of bu	siness, briefly sta		acture of
Cust	om Draperies		
FOURTH: If foreign co	rporation, addres	es of its principal off	fice
' FIFTH: Business addre	ss in Rhode Islan	d (blank reports w	ill be mailed to this
address) 951 No	Main St ^P rovid	ence R I 02904	
SIXTH: Names and add	lresses of its dire	ectors and officers:	
(Addresses must	include street and n	umber, if any)	
Name	Office	Add	02 8 60
Maxwell Morgan	Director	15 Sheffield	
E Barbara Morgan	Director	15 Sheffield	Ave Pawt R I 02860
	Director		
Michale J Morgan	President	113 Kenilworth	Way "erion PA 19066
,	Vice President		
E B _a bara Morga n	Secretary	15 Sheffield	Ave Pawt R I 02860
E Barbara Morgan	Treasurer	15 Sheffield	Ave Pawt R I 02360
(If additional space is needed, at			
SEVENTH: Number of	Shares authorized	d:	Par Value or statement that
No. of Shares	Class	Scries	shares are without par value
500		JUL 12191	Par
EIGHTH: Number of S	hares issued:		Par Value
No of Shares	Class	Series	or statement that shares are without nar value
100	6 20		No
Dated: 6/13/83	83 19	Marion Mfg (Name of Corporation)	Со
	136A * Title	ESasar Mo TREASURER	orga
		(Report must be signe	ed by an officer)
If the corporation has cha Form #9 must be filed. Plea	inged its redistered ise contact correct	office and/or its region Division for informa	istered agent, ition. 277-3040

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

			Annual Report	for the year	1982	
First:	The name of t	he corporatio	nis			
	Ma	arion "fg C	0. •			
SECOND:	It is incorpo	orated under	the laws of	R I		
THIRD:	Character of l	ousiness, brief	ly stated, is	lanuf a cture	Dra peņie	os
Fourth	: If foreign	corporation, a	address of its pr	incipal office		············
FIFTH: address)			Island (blank r Providence R	_	mailed to	this
SIXTH:	Names and a	ddresses of it	s directors and o	officers:		
	(Addresses m	ust include street	t and number, it any)			
Maxwell	Name Morgan ra Morgan	Office Director		Address 15 Sheffic same		aw tuak et
	•					- •
Michael	J Morgan	. Director	113 Ken	ilworth Rd	Merion P	 A 19066
•	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	President	- ·			
	a Morgan	. Vice Presi	dent	Pawtu แ	cket R I	
		Secretary				
	ico is needed, atta	Treasurer				····
Seventh	: Number of	Shares author	orized:	or	Par Value	
No. of Sha	ires	Class	Series		res are without par value	
500		1		K	O PAR OCT 6	1982
Еіснтн:	Number of	Shares issued	d:	ore	Par Value	
No. of Sha	ires	Class	Series		res are without par value	•
100		1	10	N	IO PAR	
Oc Dated:	t.4 , 1982	19	82 Mario (Name of Corpor By Corpor Title TRE.	mager		· .
			• (Report mi	ust be signed by	an officer)	
If the o	ornoration has o	hanged its reg	istered duce and	or its registers	anent	7
			rporation Division			

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT OF

Marion Mfg Co.

Pursuan	t to the provi	sions of Sect	ion 7.1.	l-118 of	the	General	Laws,	1956,	as
amended, the	undersigned	corporation	hereby	submits	the	following	annua	l repo	rt

FIRST: The name of the corporation is Marion Mfg Co.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

951 North hain St. Providence

and the name of its registered agent in Rhode Island at such address is

E Barbara Morgan

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is manufacturing draperies

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	* Address
Maxwell Morgan	Director	15 Sheffield Ave Pawtucket R I
E Barbara Morgan	Director	same
	Director	
•	Director	•
	Director	
	Director	
Michael J.Morgann	President	same
Ez gagbazazkozga n	Vice President	*
E Barbara ^h organ	Secretary	
E Barbara Morgan	Treasurer	H

SEVENTH: 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	9	Series	Par Value per Share or Statement that Shares are without Par Value
600	1	81	1	NONE
				NO Par Value
31 11 80				SEP 21 1981
) (g		

 $\label{eq:Eighth:} Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:$

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
C O S	1	1	No Par Value

Sept. 14 ,19 81 Dated

Marion Mfg Co. (NAME OF COPPORATION)

E Badan Magn Ву

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REI	PORT	
MARION MF	=G. (Ô.	
Pursuant to the provisions of Section 7.1. amended, the undersigned corporation hereby s FIRST: The name of the corporation is	.1-118 of the General Laws, 1956, as submits the following annual report:	
SECOND: It is incorporated under the law	ws of 1.	
THIRD: The address of its registered office in	in Rhode Island is 751	
and the name of its registered agent in Rhode Isla		
FOURTH: If a foreign corporation, the add country under the laws of which it is incorporated	- · · · · · · · · · · · · · · · · · · ·	
FIFTH: The character of the business in value		
	15 SHEFFIFELD AVE PAWIL	ĸĸŧ
SEVENTH: The aggregate number of shares v by classes, par value of shares, shares without parv	value, and series, if any, within a class, is:	
Number of Shares Class	Series Par Value per Share or Statement that Shares are without Par Value NO PAR VAL	VΕ
Form 31 8-79	AUG 14 1980 4552A 14 1150	

EIGHTH: The aggregate number of its issued shares, 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 per Share or Statement that Shares are without Par Value

| DO | PAR VALUE |

Dated F/12, 19 FO Marion Wife Co
(MANIE CE CORPORATION)

By Wax Well Moyon

(

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

	OF	1	
MAS	SION MEG	CO	
amended, the undersigned c	orporation herel	7.1.1-118 of the General Laws, by submits the following annua	l report:
SECOND: It is incorpor	rated under the	laws of Phode Is Land	
		ice in Rhode Island is 127 No.	
and the name of its registered		Island at such address is	
FOURTH: If a foreign country under the laws of which		address of its principal office in the	e state or
Island, briefly stated, is $$	ANUFACTUI	in which it is actually engaged in the DRAPES & SLIPCO	UVERS
Name	Office Director	Address	
	Director Director Director Director	IT SHEFFIELD	AVE
MAXWELL MORE	Director President	PAWTYCKET, RIT	,
E BA RBARA MORE MAXWELL MOREAX E BARBARA MOR	## Vice Preside ✓ Secretary	PANTUCKET RI 02 PANTUCKET RI	460
		es which it has authority to issue,	

Number of Shares	Class	3 Series	or Statement that Shares are without Par Value
500	1	79 (NO PAR
		7542A	
orm 31 30M 1578		··: 5.00 ··15.00	MAR 1 3 1979
		<u>&</u>	

Eighth: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	<u>Class</u>	<u>Scri</u> es	Par Value per Share or Statement that Shares are without Par Value
10-2)	J	/	NOPAR

Dated FRB. 19, 1979 NIARICH MFG-CU.

By War well Margin

Ita Fris

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	'	OF -		
	MARIUNA	uff co		
(provisions of Sectio	on 7.1.1-118 of the G	General Laws, 1956, as	
	MARION	is MFH CU		
SECOND: It is in	corporated under the	e laws of		
THIRD: The add	ress of its registered しょ	office in Rhode Island	is CDANGE CDANG	>
and the name of its regi	istered agent in Rhod			
FOURTH: If a fo country under the laws		=	ipal office in the state or	
country under the laws	or which it is meorpe	oraceu is		
Errore Oho aha			aller an area of the Dhade	
Island, briefly stated,		ess in which it is acti	ally engaged in Rhode	
island, biletty stated,	DRAPTA	MANU FACT	TURINT	
Siytu. The names	and respective addre	esses of its directors an	d'officers are:	
Nama	Office			
MAXWELL MOK E, BARBARA A	Director	13 2 1081 1	Address FIETO AVE PAWÎ E ODFL	' 41 "
CE, DAKD, MYA. C		1VW	E VOVO	<i>y</i>
	Director Director	,		
	Director			
	Director			
M MORGAN	President			
E B MOR	VAT Vice Pres	sident	N	
M MURE	Secretary			
E B MCR	Treasurer	·		
SEVENTH: The a by classes, par value of s			hority to issue, itemized if any, within a class, is:	
•	,		Par Value per Share	
Number of Shares	Class	Series	or Statement that Shares are without Par Value	
400			NO PAR	
		蓬	·	
		i& 13-7€ \$		
		77 26.5		
		1.7		_

8781 3.5 MAL

Form 31 35M 11-77

.<u>.</u>

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	or Statement that Shares are without Par Value	
			NO PAR	

Dated 1/12, 19 H MARION MF-F- (C)

By WARWELL W. Marchen

Its Near Clevel



To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNILAT DEDON

	ANNUAL OI			
	MARKON		(0	
amended, the undersig		7.1.1-118 of the y submits the fol	e General Laws, 1956, as lowing annual report:	
SECOND: It is in	corporated under the la	aws of K	2).	
THIRD: The add	lress of its registered of	fice in Rhode Isla イル・ケナ	nd is PROVIDENCE	
	istered agent in Rhode	Island at such ad	•	
	oreign corporation, the of which it is incorpora		incipal office in the state or	
Island, briefly stated,	is <u>Manuta</u>	 		
MARWELL ME E. BANBARA	Director Director Director Director President MARMA Vice President Secretary	15 JH	and officers are: Address ETFILLI SUFT WILCHT R. 0 & to c	
SEVENTH: The a	ggregate number of sha	res which it has a ar value, and seri	authority to issue, itemized es, if any, within a class, is:	
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value	
100		_ ·	NO VAR VAL	V_{i}

DEC 27 1977

FIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Par Value per Share or Statement that Shares are without Par Value

No PAR VALUE Number of Shares Class Series 100

Dated DET 20, 1977 MARION MFG (O
(NAME OF CORPORATION)

By MANUEL Mayar

Its. Visualing

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 \mathbf{OF}

Pursuant to the provision amended, the undersigned corp	ons of Section 7. poration hereby s	1.1-118 of th ubmits the fo	e General Laws llowing annual r	, 1956, as eport:
FIRST: The name of the		· <u></u>	***	
				4.46.0
SECOND: It is incorporate	ted under the law:	sof	TODE 111	
THIRD: The address of i \rightarrow and the name of its registered a	vo. MAW.	SI. Pr	COVIDENT	A 102803
MAXW	ELL M	cabar		
FOURTH: If a foreign cocountry under the laws of which	rporation, the add	dress of its pr	incipal office in t	he state or
FIFTH: The character of Island, briefly stated, is	f the business in	which it is a	ctually engaged	in Rhode
SIXTH: The names and resp	oective addresses o	of its directors	and officers are:	
	Director			
	Director			
	Director			
	Director	•		
	Director			
·	Director			
MAXWELL MORGA	President	15 SHE	FIELD ALK	MILINKIT A
E BOKKSAM MOREHA	Vice President	• -	t į	
MATWELL MORGAN	Secretary		1.1	•
E. Surban Morgo	Treasurer		16	
SEVENTH: The aggregate by classes, par value of shares, sh	e number of shares ares without par v	s which it has ; value, and scri	authority to issue es, if any, within a	, itemized a class, is:
Number of Shares	Class	Series	Par Value pe or Statemer Shares are v Par Va	nt that vithout
280 400			NO VAI	C NUT IT

nct 1 1977

Form 31 12M B-77

FIGHTH: The aggregate number of its issued shares, 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 per Share or Statement that Shares are without Par Value	
200			NO PAR	

Dated Oct 13, 19Th MARION MFG CO
(NAME OF CORPORATION)

By WARNEL MCGar

Its President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

 \mathbf{OF}

MAR	ION MFG CO			
amended, the undersigned co	rporation herel	by submits the follow		
FIRST: The name of the	-			
SECOND: It is incorpor	ated under the	laws of Rhode	sland	
THIRD: The address of	fits registered o	02002	lis 128 No Main St	
and the name of its registered	l agent in Rhod	e Island at such addr	ess is	
Ma	axwell Morga	<u></u>		
FOURTH: If a foreign	corporation; the	e address of its prin	cipal office in the state or	
country under the laws of wi	• 7			
FIFTH: The character	of the husines	ss in which it is act	ually engaged in Rhode	
Island, briefly stated, is		ng		
	, - 1			
SIXTH: The names and	respective add	resses of its directors	and officers are:	
Maxwell Morgan	Director	15 Sheffie	ld Ave Pawtucket R	I 02860
E Barbara Morgan	Director		same	
	Director			
Maxwell Morgan	President		ti Ir	
E Barbara Morgan	Vice Preside	ent .	•	
Maxwell Morgan	Secretary		ıı	
E Barbara Morgan	Treasurer			
SEVENTH: The aggregate by classes, par value of shares,				
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value	
500	1	1	No Par	
-	İ	* . 1	NOTAL	
25ct	·	1	/ -	

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Seri es	Par Value per Share or Statement that Shares are without Par Value
100	1	1	No Par
1 57	1	. !	10 141

Dated Feb.13,1975 ,19

Marion Mfg Co

CEC

PR 17-75 STATE :812 48****15.00

To be filed annually between January 1st and March 1st

State of Rhade Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPÕRT OF

Mari	on Mfg. Co.	5	
Pursuant to the provision amended, the undersigned corporate First: The name of the	poration hereby su	bmits the followi	ng annual report:
SECOND: It is incorpora	ted under the laws	of Rhode	Island
THIRD: The address of i		in Rhode Island	is 128 No.Main St.
and the name of its registered a	agent in Rhode Isla	nd at such addre	ss is
FOURTH: If a foreign cocountry under the laws of which	ch it is incorporate	-	pal office in the state or
FIFTH: The character of Island, briefly stated, is Ma	of the business in	which it is actu	ally engaged in Rhode
SIXTH: The names and re	espective addresse.		and officers are:
Maxwell Morgan	Director 15 S	heffield Ave	. Pawtucket R I
E.Barbara Morgan	Director Director	same	
	Director Director		
Maxwell Morgan E.Barbara Morgan Maxwell Morgan E.Barbara Morgan	Director President Vice President Secretary Treasurer	11 11 11	
SEVENTH: The aggregate by classes, par value of shares, sh			
Number of Shares	Class	Series	or Statement that Shares are without Par Value
500			NONE

JAN 17 1974

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares 100

Class

Series

Par Value per Share or Statement that Shares are without Pur Value

Jan.15,1974, 19 Dated

Marion Mfg. Co.

Its

(NAME OF CORPORATION)

Ву

President

JM 24-74 STATE 1.004 LB+++15.00

FORM 31 804 8-72

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Mar	ion Mfg.Co.				
Pursuant to the provamended, the undersigned FIRST: The name of	corporation her	eby submits the fo	llowing a	innual repo	956, as ort:
SECOND: It is incorp			de Isla	nd	
		office in Rhode Isl			.Main S
and the name of its registe	red agent in Rh	ode Island at such	address i	3	
FOURTH: If a foreign country under the laws of v					
FIFTH: The character briefly stated, is Ma					
SIXTH: The names as	nd respective ad	dresses of its direc	tors and o		, ,
Maxwell Morgan	Director	15 Sheffield			RI
E Barbara Morgan	Director	15 Sheffield	Ave Par	wtucket F	R I
	Director				
	Director				
***	Director				
	Director				
Maxwell Morgan	President				
E Barbara Morgan	Vice Presid	ent			
Maxwell Morgan	-	S <i>i</i>	ME		
E Barbara Morgan	Treasurer				
SEVENTH: The aggreg by classes, par value of share	ate number of sl s, shares withou	nares which it has a t par value, and seri	uthority es, if any,	to issue, ite within a cla	emized ass, is:
Number of				ar Value per S or Statement th Shares are with	bat
Shares	Class	Series	-	Par Value	
200	1			NO	

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Cinsy	Series	Par Value per Share or Statement that Shares are without Par Value
100	1		NO

Dated Feb.12 , 19 73

Marion Mfg.Co.

HAME OF CORPORATION;

Pres & Sec

NAR -6-72 MA-ST. 670 A3*** 15.00

FORM 31 40M 9:71

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	01			
	MARION MI	FG. C.O.		
amended, the undersi FIRST: The na	provisions of Section 7-gned corporation hereby sme of the corporation is 1800 M	submits the foll		
SECOND: It is i	ncorporated under the lay	vs of .	R.).	
THIRD: The ad	dress of its registered office	ce in Rhode Isla	nd is PROVIDENCE	
and the name of its re	egistered agent in Rhode I	sland at such a	ldress is	
	oreign corporation, the advs of which it is incorpora		cipal office in the state or	
hriadu stated in			engaged in Rhode Island,	
MARWELL ME E. Barbara M	Director Director Director Director Director		ors and officers are: Address FFIELD ALL VOICET	
SEVENTH: The a	ggregate number of share: shares, shares without par	s which it has at value, and serie	ithority to issue, itemized	
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value	
500	1	1	NO	

EIGHTH: The aggregate number of its issued shares, 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 per Share or Statement that Shares are without Par Value
100	1	1	10

Dated Feb 74 , 19 71

MANUS OF CORPORATION)

By Marwell Mayon

7-77-84. 161 3540**