RI SOS Filing Number: 202194662150 Date: 3/17/2021 4:00:00 PM

This period: January 1 - March 1 → Filing period: January 1 - March 1 → Filing period: 350.00 → Penalty Additional \$25.00 fee if form is not filed by April 1. 1. Entity It Number 2. Exact name of the box to indicate an attachment of the corporation by the receiver of trustee. 1. Entity It Number 2. Exact name of the Number And Entity It Number And Entity I	State of Rhode Isla Department of	Division	vision FILED					
125786 CASEY & SONS, INC. 3. Principal Office Address 556 MAIN STREET 4. NAICS Code 4. NAICS Code 5. Brief description of the character of business conducted in Rhode Island AUTO BODY REPAIR SHOP 5. State of incorporation RITODE ISLAND 7. List ALL Gircer (names and addresses) Street Address 103 SAMUEL AVENUE City PAWTUCKET Street Address 103 SAMUEL AVENUE Street Address 103 SAMUEL AVENUE City PAWTUCKET State 104 State 105 State 105 State 106 State 107 City PAWTUCKET State 107 City PAWTUCKET State 108 State 109 City State 100 City State 100 COMMON 100 PAR 11. This information is currently of record in the Department of State. 11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receit trustee, this report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report must be executed on behalf of the corporation by the receiver or trustee. 11. This report	Corporation → Filing period: January 1 - March 1 → Filing Fee: \$50.00			_				
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AUTO BODY REPAIR SHOP 5. State of Incorporation RITODE ISLAND 7. List ALL officers (names and addresses) Check the box to indicate an attachme President Name CASEY LOPES Street Address 103 SAMUEL AVENUE City PAWTUCKET State RI Street Address Street Address Street Address Street Address City PAWTUCKET State State City PAWTUCKET State Street Address Street Address City State City State City State City City State City City State City City State City City State City St	·			1 '	EL		· ·	
President Name CASEY LOPES Vice-President Name ARLETTE LOPES	811121 5. State of Incorporation							
City PAWTUCKET State RI Zip 02860 City PAWTUCKET State RI Zip 02860 Treasurer Name Street Address City State Zip Check the box to indicate an attachment of the corporation by an authorized representative. If the corporation is in the hands of a receitrustee, this report must be executed on behalf of the corporation by the receiver or trustee. Value of Authorized Representative City City Could Company State Zip City State Zip Common NUMBER OF SHARES CLASSISERIES RAT VALUE NOM PAR COMMON NO PAR Common statements, and that all statements contained herein are true and correct. Name of Authorized Representative	7. List ALL officers (names a President Name CASEY LOP	Check the box to indicate an attachment Vice-President Name ARLETTE LOPES						
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CASEY LOPES [3/13/2051			Date 3/3/2021					
Signature of Authorized Representative	Signature of Authorized Rep		<i>></i>	.		_1 -/		

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov