RI SOS Filing Number: 202194831880 Date: 3/22/2021 4:00:00 PM

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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2021

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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MAR 2 2 2021

1. Entire 113 Number	7 1 1	ne of the Corporation HER ENVIRO		CONSULTING	GROUP, I	NC.		
3. Principal Office Address			City		State	Zip		
180 East Shore Road			Jamestown	n	RI	02835		
4. NAICS Code	6. Brief desc	6. Brief description of the character of business conducted in Rhode Island						
621498	To carry or	To carry on a general environmental, safety and health consultant and advisory business relating						
5. State of Incorporation	to the oper	ation of business	es, plants, prope	erties and real and	personal pro	perty of every kind.		
Rhode Island								
7. List ALL officers (names a	and addresses)		•	Chec	k the box to in	dicate an attachment 🔲		
President Name Robert J. Gallagher			Vice-President Name					
Street Address 180 East Shore Road			Street Address					
City Jamestown	State RI	Zip 02835	City		State	Zıp		
Secretary Name Robert J. Gallagher			Treasurer Name Robert J. Gallagher					
Street Address 180 East Shore Road			Street Address 180 East Shore Road					
City Jamestown	State RI	^{Zip} 02835	City Jamestown		State RI	^{Zip} 02835		
8. List ALL directors (names	and addresses)	t	<u> </u>	Chec	k the box to in	dicate an attachment		
Director Name	<u>-</u>		Director Name	e				
Street Address			Street Address					
City	State	Zip	City		State	Zip		
Director Name			Director Name					
Street Address			Street Addres	SS .				
City	State	Zip	City		State	Zip		
9 Shares Authorized		10. Shares Issued		Check the box to indicate an attachment				
This information is currently	of record in the	NUMBER (OF SHARES	CI ASS/SFRIES		PAR VALUE		
Department of State.		500		Common		No Par Value		
Changes require an addition	al filing.							
11. This report must be exe	cuted on behalf of the	corporation by an	authorized repre	sentative. If the corp	oration is in t	he hands of a receiver or		
trustee, this report must be	executed on behalf o	f the corporation by	the receiver or t	rustee				
Under penalty of perjury, statements, and that all st				including any acco	mpanying so	chedules and		
Name of Authorized Repres				· · · · · · · · · · · · · · · · · · ·	Date			
Robert J. Gallagher			3-	4-21				
Signature of Authorized Rep	•	SIGNIDO	OCUMENT HERE			• -		
Lobert & A	Fallagher	SIGN DO	JOUNILINI HERE	-				

MAIL TO:

Division of Business Services

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

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