

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:
 Administrative Services Notwithstanding the foregoing, the purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized to do business under the laws of its jurisdiction of incorporation.

8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of the state or country of which it is incorporated):

NAME	ADDRESS

Check the box to indicate an attachment

8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated):

OFFICE	NAME	ADDRESS
PRESIDENT		
VICE PRESIDENT		
TREASURER		
SECRETARY		

Check the box to indicate an attachment

9. 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	SERIES	PAR VALUE OR STATE NO PAR VALUE
30,000	Common		\$1.0000

10. An estimate, as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. (Note: Percentage obtained from worksheet.)

0 %

11. An estimate, as a percentage, of the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. (Note: Percentage obtained from worksheet.)

0 %

12. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

13. Date when the Certificate of Authority will be effective: **CHECK ONE BOX ONLY**

Date received (Upon filing)

Later effective date (Date must be no more than 90 days from the date of filing) _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

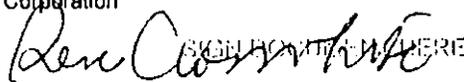
Type or Print Name of Authorized Officer

Rene Crosswhite, Assistant Secretary/Assistant Treasurer

Date

4-26-21

Signature of Authorized Officer of the Corporation


SIGN HERE

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 150 - Revised: 08/2020

NAME	TITLE	ADDRESS
Crosswhite, Rene	Assistant Secretary/Assistant Treasurer	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144
Porterfield, Mark	Chief Security Officer	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144
Prince, Patrick	Director	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144
Prince, Patrick	CFO	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144
Robertson, Prentice	President and COO	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144
Seguin, Pierre-Hubert	Director	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144
Seguin, Pierre-Hubert	Secretary	1699 South Hanley Road, Suite 350, St. Louis, Missouri 63144

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CERTIFICATE OF GOOD STANDING

I, John R. Ashcroft, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Whelan Security Management Company, Inc.

01180420

A Missouri entity was created under the laws of this State on 10/31/2011, and in Good Standing, having fully complied with all the requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri.
Done at the City of Jefferson, the 16th day of April, 2021.


Secretary of State

Certification Number: CERT-IN76768

