

## **Application for Certificate of Authority** FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL $7-1.2-1405$ , the applies for a Certificate of Authority to transact but for that purpose submits the following statement:		
The name of the corporation is:		
Crown Energy Services, Inc.	•	
2. It is incorporated under the laws of: Califo	ornia	
3. The name, if different, which it elects to use in	Rhode Island is:	
(a) If the name of the corporation in its jurisdictio "incorporated", or "limited," or an abbreviation the above corporate endings for use in Rhode Island	ereof, then list the name of the corp	the word "corporation", "company", poration with the addition of one of the
(b) If the corporate name is not available in Rhoc corporation will qualify and transact business in I filed with this application:	de Island, then set forth below the fi Rhode Island as stated in the "Ficti	ictitious name under which the tious Business Name Statement" to be
4. The date of its incorporation is: May 31, 1	995	
And the period of its duration is: CHECK ONE E	BOX ONLY	, <u>, , , , , , , , , , , , , , , , , , </u>
Perpetual (on-going)		
Date certain for dissolution		
5. The address of its principal office is:		-
868 Folsom Street San Francisco CA 94107		
6. The name and address of the initial registered	agent/office in Rhode Island:	
Agent Name Corporation Service Company		
Street Address (NOT a P.O. Box) 222 Jefferson	Boulevard, Suite 200	
City/Town <b>Warwick</b>	State RHODE ISLAND	Zip Code <b>02888</b>

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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

MAY 11 2021

FORM 150 - Revised: 12/2017

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:					
Building Maintenance					
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		
Michael Boschetto 868 Folsom S		868 Folsom Street S	an Francisco	CA 94107	
Paul Boschetto 868 Folsom Stree		868 Folsom Street S	an Francisco	CA 94107	
	<del></del>				
				Check the box to indicate an attachment	
of the state or country o	espective address f which it is inc	esses of its principal officipated):	cers (mandate	ory if directors are not required under the laws	
OFFICE		NAME		ADDRESS	
PRESIDENT	Paul Saccone		868 Folsom Street San Francisco CA 94107		
VICE PRESIDENT					
TREASURER	Paul Boschetto		868 Folsom Street San Francisco CA 94107		
SECRETARY	Paul Boschetto		868 Folsom	Street San Francisco CA 94107	
			<u> </u>	Check the box to indicate an attachment	
9. The aggregate number par value, and series, if	er of shares wh any, within a c	nich it has authority to is lass, is:	sue; itemized	by classes, par value of shares, shares without	
NUMBER OF SHARES	CLAS	S	SERIES	PAR VALUE OR STATE NO PAR VALUE	
250,000	Common		<b>a</b> 1	0.00	
				<del></del>	
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.)					
%					
11. An estimate, <b>as a percentage</b> , 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. ( <i>Note: Percentage obtained from worksheet.</i> )					

## 8. (b) The names and respective addresses of its principal officers continued:

Claude Perasso
Assistant Secretary
868 Folsom Street
San Francisco CA 94107

Jeff Wofford
CFO
868 Folsom Street
San Francisco CA 94107

12. This application must be accompanied by a <u>Certificate of (</u> formation dated within 60 days of the date of this filing.	Good Standing/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective: CH	ECK 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 exam accompanying attachments, and that all statements contained	
Type or Print Name of Authorized Officer	Date
Jeff Wofford	12/17/2020
Signature of Authorized Officer of the Comparation	CFO
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I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: CROWN ENERGY SERVICES, INC.

File Number: C1898294
Registration Date: 05/31/1995

Entity Type: DOMESTIC STOCK CORPORATION

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of May 6, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 7, 2021.

SHIRLEY N. WEBER, Ph.D. Secretary of State

Certificate Verification Number: R4L7LER

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at <a href="mailto:bebizfile.sos.ca.gov/certification/index">bebizfile.sos.ca.gov/certification/index</a>.