



State of Rhode Island

Department of State - Business Services Division

**Application for Reservation of Entity Name**

DOMESTIC or FOREIGN Entity

- Business Corporation Filing Fee: \$50.00 → Partnership Filing Fee: \$50.00  
 → Limited Liability Company Filing Fee: \$50.00 → Non-Profit Corporation Filing Fee: \$20.00

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
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The undersigned applicant applies for reservation of the following entity name for a non-renewable period of 120 days from the date of this filing:

1. The name to be reserved is:

Revvity, Inc.

2. The name is being reserved for the entity type listed below:

- ☒ Business Corporation (including Professional and Foreign Corporations) RIGL 7-1.2-403  
 Partnership (including Foreign Partnerships) RIGL 7-13.1-115 or 7-12.1-906  
 Limited Liability Company (including Foreign Limited Liability Companies) RIGL 7-16-10  
 Non-Profit Corporation (including Foreign Non-Profit Corporations) RIGL 7-6-11.1

3. The name reservation will be recorded exclusively in the name of the applicant. The right to the exclusive use of a specified entity name so reserved may be transferred to any other person by filing in the office of the RI Department of State a notice of the transfer, executed by the applicant for whom the name was reserved, specifying the name and address of the transferee, and paying the appropriate fee.

4. List the Name of Applicant:

C T Corporation System

Address:

155 Federal Street Suite 700

City/Town:

Boston

State:

MA

Zip Code:

02110

*Under penalty of perjury, I declare and affirm that the information contained herein is true and correct.*

Submitted by:

C T Corporation System by Olga Hinkel, Assistant Secretary

Address:

155 Federal Street Suite 700

City/Town:

Boston

State:

MA

Zip Code:

02110

Signature of Authorized Person

Date

01/27/2023

**MAIL TO:**

Division of Business Services

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

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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BY T421M

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](mailto:corporations@sos.ri.gov).



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,  
  
hereby certify that this document, duly executed in accordance with the provisions  
  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this  
  
office on this day:

February 01, 2023 01:51 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

