



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$310.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Corporation  
Application for Certificate of Authority**

(Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

The name of the corporation is AHEARN EQUIPMENT, INC.

**SECTION II**

It is incorporated under the laws of State: MA Country: USA

This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

**SECTION III**

The name, if different, which it elects to use in Rhode Island:

(a) *If the name of the corporation does not contain the word "corporation", "company", "incorporated", or "limited", or an abbreviation thereof, add one of these corporate endings for use in Rhode Island OR*

(b) *if the corporation proposes to qualify and transact business under a different name, list that name:*

*Note: If option (b) is elected, a Fictitious Business Name Statement (FORM 624A) is required to be filed with this application*

**SECTION IV**

The date of its incorporation is 1/4/1988

and the period of its duration is ☒ Perpetual ☐

**SECTION V**

The location of its principal office is

No. and Street: 460 MAIN ST

City or Town: SPENCER

State: MA

Zip: 01562

Country: USA

**SECTION VI**

The address of its proposed registered office in Rhode Island is

No. and Street: 450 VETERANS MEMORIAL PARKWAY  
SUITE 7A

City or Town: EAST PROVIDENCE

State: RI

Zip: 02914

and the name of its proposed registered agent in Rhode Island at that address is C T CORPORATION SYSTEM

**SECTION VII**

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

TO INVEST IN, OWN, DEVELOP, MANAGE, LEASE AND OPERATE REAL PROPERTY AS WELL  
AS ANY BUSINESS RELATED TO THE FOREGOING OR USEFUL IN CONNECTION THEREWITH  
AND ALL LAWFUL PURPOSES FOR WHICH A LIMITED LIABILITY COMPANY MAY BE  
ORGANIZED UNDER THE LAWS OF THE STATE OF RHODE ISLAND.

**SECTION VIII**

(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).

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JEREMY J AHEARN	460 MAIN ST. SPENCER, MA 01562 USA
TREASURER	JOSHUA T AHEARN	460 MAIN ST. SPENCER, MA 01562 USA
SECRETARY	DOUGLAS T RADIGAN	460 MAIN ST. SPENCER, MA 01562 USA
DIRECTOR	JEREMY J AHEARN	460 MAIN ST. SPENCER, MA 01562 USA
DIRECTOR	JOSHUA T AHEARN	460 MAIN ST. SPENCER, MA 01562 USA

(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).

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JEREMY J AHEARN	460 MAIN ST. SPENCER, MA 01562 USA
TREASURER	JOSHUA T AHEARN	460 MAIN ST. SPENCER, MA 01562 USA
SECRETARY	DOUGLAS T RADIGAN	460 MAIN ST. SPENCER, MA 01562 USA
DIRECTOR	JEREMY J AHEARN	460 MAIN ST. SPENCER, MA 01562 USA
DIRECTOR	JOSHUA T AHEARN	460 MAIN ST. SPENCER, MA 01562 USA

**SECTION IX**

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:

<b>Class of Stock</b>	<b>Series of Stock</b>	<b>Par Value Per Share</b>	<b>Total Authorized Shares</b> <i>Num of Shares</i>	
CNP			\$0.0000	100.00
CNP			\$0.0000	4,900.00

**Signed this 19 Day of April, 2023 at 2:20:27 PM by the officers(s).** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.*

By JEREMY J AHEARN, PRESIDENT  
Signature of Authorized Officer of the Corporation

Form No. 150  
Revised 09/07

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State of Rhode Island

## Department of State - Business Services Division

## Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

STAMP

FOR  
SECRETARY OF STATE  
USE ONLY

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is: AHEARN EQUIPMENT, INC.		
2. It is incorporated under the laws of: MASSACHUSETTS		
3. The name, if different, which it elects to use in Rhode Island is: (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:  (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:		
4. The date of its incorporation is: JANUARY 4, 1988		
And the period of its duration is: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is: 460 MAIN ST., SPENCER, MA 01562		
6. The name and address of the initial registered agent/office in Rhode Island:		
Agent Name C T Corporation System		
Street Address ( <u>NOT</u> a P.O. Box) 450 VETERANS MEMORIAL PARKWAY SUITE 7A		
City/Town EAST PROVIDENCE	State RHODE ISLAND	Zip Code 02914

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

STAMP

FOR  
SECRETARY OF STATE  
USE ONLY



7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:  
 TO INVEST IN, OWN, DEVELOP, MANAGE, LEASE AND OPERATE REAL PROPERTY AS WELL AS ANY BUSINESS RELATED  
 TO THE FOREGOING OR USEFUL IN CONNECTION THEREWITH AND ALL LAWFUL PURPOSES FOR WHICH A LIMITED  
 LIABILITY COMPANY MAY BE ORGANIZED UNDER THE LAWS OF THE STATE OF RHODE ISLAND

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
JEREMY J. AHEARN	460 MAIN ST., SPENCER, MA 01562
JOSHUA T. AHEARN	460 MAIN ST., SPENCER, MA 01562

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	JEREMY J. AHEARN	460 MAIN ST., SPENCER, MA 01562
VICE PRESIDENT	NONE	
TREASURER	JOSHUA T. AHEARN	460 MAIN ST., SPENCER, MA 01562
SECRETARY	DOUGLAS T. RADIGAN	460 MAIN ST., SPENCER, MA 01562

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
100	Class A Voting Common Stock	NONE	NONE
4,900	Class B Non-Voting Common Stock	NONE	NONE

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.)

50 %

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.)

10 %

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) \_\_\_\_\_

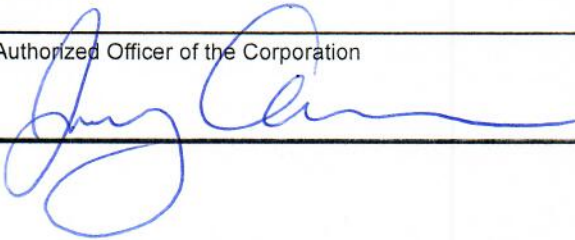
*Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of Authorized Officer  
JEREMY J. AHEARN

Date

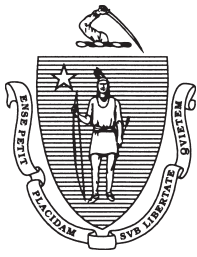
4/14/23

Signature of Authorized Officer of the Corporation



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).

FORM 150 - Revised: 12/2021



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

William Francis Galvin  
Secretary of the  
Commonwealth

Date: March 24, 2023

To Whom It May Concern :

I hereby certify that according to the records of this office,  
**AHEARN EQUIPMENT, INC.**

is a domestic corporation organized on **January 04, 1988** , under the General Laws of the Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 23030565480

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: ili





## Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name: Brian O. Allen		Date: 04 / 18 /2023
Proposed Entity Name: AHEARN EQUIPMENT, INC.		
Street Address: 311 Main Street		
City: Worcester	State: MA	Zip Code: 01608
Email Address: ballen@bowditch.com		Phone Number: (508) 926-3335





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:

April 19, 2023 02:18 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized.

Gregg M. Amore  
*Secretary of State*

