



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023-AMENDED
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2023 SEP -1 P 1:25

1. Entity ID Number 000130302		2. Exact name of the Corporation Arup USA, Inc.												
3. Principal Office Address 77 Water Street, 5th Floor			City New York	State NY	Zip 10005									
4. NAICS Code 541330		6. Brief description of the character of business conducted in Rhode Island Professional Engineering Services												
5. State of Incorporation Massachusetts														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☒														
President Name Sec Attached			Vice-President Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Secretary Name			Treasurer Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☒														
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
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 Department of State. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>0 issued (100)</td> <td>CWP</td> <td>\$1.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	0 issued (100)	CWP	\$1.00			
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		0 issued (100)	CWP	\$1.00										
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.														
Name of Authorized Representative Joe Davis					Date 08/23/2023									
Signature of Authorized Representative 														

FILED

SEP -1 2023

BY _____

Attachment to Rhode Island Amendment

Arup USA, Inc. – Officer/Director List

1. Officers' names, titles

Fiona Mary Cousins (President), 77 Water Street, 5th Floor, New York, New York 10005, United States

Ricardo Pittella (Vice President), 77 Water Street, 5th Floor, New York, New York 10005, United States

Carolyn Poirier (Treasurer and Secretary), 77 Water Street, 5th Floor, New York, New York 10005, United States

2. Directors' names and addresses

Fiona Mary Cousins, Director, 77 Water Street, 5th Floor, New York, New York 10005, United States

Daniel Brodtkin, Director, 77 Water Street, 5th Floor, New York, New York 10005, United States

Paul Coughlan, Director, 77 Water Street, 5th Floor, New York, New York 10005, United States



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:

September 01, 2023 01:25 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

