RI SOS Filing Number: 202342046720 Date: 10/4/2023 1:10:00 PM



State of Rhode Island Department of State - Business Services Division

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

2023 OCT -4 P 1: 10

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

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:				
SPG Home Services INC.				
2. It is incorporated under the laws of:				
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: Mey 4, 2017				
And the period of its duration is: CHECK ONE BOX ONLY Perpetual (on-going)				
Date certain for dissolution				
5. The address of its principal office is: 6 Water St. Milford MA 01757				
6. The name and address of the initial registered agent/office in Rhode Island:				
Rhode-Island Builders Association Inc				
Street Address (NOT a P.O. Box) 450 Veterans Memorial Prwy #301				
East Providence State RHODE ISLAND ZIP Code 02914				

MAIL TO:

Division of Business Services

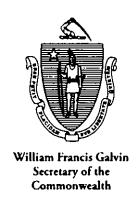
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 0 4 2023 1:10 BY KBCF1 AR

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: ROOFing & Siding. home Renobations. Window Framing. Deck. Addition: home builder More:						
1 400 ting 9 3		NOME KEN	0 #a 11013. W	JINOUW 1	TYDMINY.	
(a) The names and re state or country of which			otional, unless directors	s are required ur	nder the laws of the	
NAME	NAME		ADDRESS			
			Check	k the box to indi	cate an attachment	
8. (b) The names and re of the state or country o	•		cers (mandatory if dire	ctors are not rec	quired under the laws	
OFFICE	NAME		ADDRESS			
PRESIDENT	Harri	a GualPa.	6. Water	. 81	Milford MA	
VICE PRESIDENT	Same abore.					
TREASURER	N 1					
SECRETARY /	Same.	obove.				
00011211111						
0 Th	-# -L	* • • • • · · · · · · · · · · · · · · ·			icate an attachment	
9. The aggregate number par value, and series, if			sue; itemized by class	es, par value of	shares, shares without	
NUMBER OF SHÂRES	CLAS	s	SERIES	PAR VALUE OR	STATE NO PAR VALUE	
1.500	<u>CWP</u>	<u> </u>		<u>op1</u>		
·						
						
			 			
10. An estimate, as a pe located within this state the following year, where	during the follo	wing year bears to the	value of all property of			
	ever located. (r	vote. петс а ткау а оокан	180 HOIH WORKSH OO L)			
11. An estimate, as a p at or from places of bus transacted by the corpo	iness in Rhode ration during th	Island during the follow	ving year compared to	the gross amou	nt thereof which will be	
35%						

12. This application must be accompanied by a Certificate of Go formation dated within 60 days of the date of this filing.	od Standing/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective: CHEC	CK ONE BOX ONLY
Date received (Upon filing)	
Later effective date (Date must be no more than 90 days fro	om the date of filing)
14. Under penalty of perjury, I declare and affirm that I have exa any accompanying attachments, and that all statements contain	• • • • • • • • • • • • • • • • • • • •
Type or Print Name of Authorized Officer	Date
Luis costro	9/25/23
Signature of Authorized Officer of the Corporation	



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

Date: September 27, 2023

To Whom It May Concern:

I hereby certify that according to the records of this office,

SPG HOME SERVICES INC.

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.

Secretary of the Commonwealth

William Travin Galein

Certificate Number: 23090483560

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

Processed by: bod

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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:

October 04, 2023 01:10 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

