



State of Rhode Island
Department of State - Business Services Division

Certificate of Withdrawal
FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-6-83, the undersigned foreign non-profit corporation hereby applies for a Certificate of Withdrawal from the state of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number: 001743381	2. The name of the corporation is: Multicultural Children's Book Day Inc.
3. It is incorporated TN under the laws of:	4. The corporation is not transacting business in this state and surrenders its authority to transact business in this state.
5. It revokes the authority of its agent to accept service of process and consents that service of process in any action, suit or proceeding arising out of the transaction of business in the state of Rhode Island, may thereafter be made on the non-profit corporation by service thereof on the Department of State of the State of Rhode Island.	
6. The post office address to which the Department of State may mail a copy of any process against the corporation that is served on the Department of State: 60 Greenwood Ave, Newton, MA 02465	
Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Withdrawal, and that all statements contained herein are true and correct.	
Type or Print the Name of ☒ President or ☐ Vice President Mia Wenjen	Date 2-21-2024
Signature of President or Vice President 	
Type or Print the Name of ☒ Secretary or ☐ Assistant Secretary Nina Tarnay	Date 2/20/24
Signature of Secretary or Assistant Secretary 	

TWO SIGNATURES ARE REQUIRED

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

FEB 23 2024

BY **60.PV1**

A.A. 11:42 AM

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.



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 23, 2024 11:42 AM

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

Gregg M. Amore
Secretary of State

