RI SOS Filing Number: 202447870590 Date: 3/5/2024 3:53:00 PM



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 Cor	poration	
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 <u>BILLING SOLUTIONS INCORPORATED</u>

SECTION II

It is incorporated under the laws of $State: \underline{IL}$ Country: \underline{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 03/05/2024

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 5/27/2004

and the period of its duration is X Perpetual

SECTION V

The location of its principal office is

No. and Street: 4N422 MOUNTAIN ASH DR

City or Town: WAYNE State: IL Zip: 60184 Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 75 PELHAM ST

City or Town: NEWPORT State: RI Zip: 02840

and the name of its proposed registered agent in Rhode Island at that address is $\underline{TIMOTHY\ PORTLEY}$

SECTION VII

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

TO REGISTER FOR PAYROLL FOR ONE REMOTE WORKER. THE ONLY PRESCENCE THE COMPANY

HAS IS THIS EMPLOYEE WORKING REMOTE THE COMPANY PERFORMS VERIFICATIONS FOR

LENDERS. THE COMPANY HAS NOT PERFORMED VERIFICATIONS FOR RHODE ISLAND LENDERS IN THE PAST. IF THEY DID PERFORM A VERIFICATION FOR A RHODE ISLAND LENDER IT WOULD ALL BE DONE IN THE ILLINOIS OFFICE.

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).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SEAN DUNLEA	4N422 MOUNTAIN ASH DR WAYNE, IL 60184 USA
PRESIDENT	SEAN DUNLEA	4N422 MOUNTAIN ASH DR WAYNE, IL 60184 USA
SECRETARY	TIMOTHY PORTLEY	75 PELHAM STREET NEWPORT, RI 02840 USA
SECRETARY	TIMOTHY PORTLEY	75 PELHAM STREET NEWPORT, RI 02840 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).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SEAN DUNLEA	4N422 MOUNTAIN ASH DR WAYNE, IL 60184 USA
PRESIDENT	SEAN DUNLEA	4N422 MOUNTAIN ASH DR WAYNE, IL 60184 USA
SECRETARY	TIMOTHY PORTLEY	75 PELHAM STREET NEWPORT, RI 02840 USA
SECRETARY	TIMOTHY PORTLEY	75 PELHAM STREET NEWPORT, RI 02840 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:

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Num of Shares	
CWP			\$1.0000	998.00

Signed this 5 Day of March, 2024 at 3:53:50 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 **SEAN DUNLEA**

Signature of Authorized Officer of the Corporation

Form No. 150 Revised 09/07
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To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

Department of Business Services. I certify that

BILLING SOLUTIONS INCORPORATED, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 27, 2004, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 5TH day of MARCH A.D. 2024 .

Authentication #: 2406502802 verifiable until 03/05/2025 Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE

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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:

March 05, 2024 03:53 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

