



State of Rhode Island  
Department of State - Business Services Division

# REINSTATEMENT

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------|---------------------|-----------------------------------------------------------------|------------------------|---------------------|----------------------------------------------------|--|--|---------------------------------------------------|--|--|------------------------------------------------------|--|--|------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------|--|--|----------------------------------------------------|--|--|-----------------------------------------------------------|--|--|
| 1. Entity ID Number:<br><br>26068                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2. The name of the entity is:<br><br>Darlington Little League Inc. American Division |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 3. Date of Revocation:<br><br>10/13/2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4. Reason for Revocation:<br><br>Annual Report                                       |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 5. Entity Type:<br><br>Non-Profit Corporation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 6. The reinstatement requirements are:<br><br><table><tr><td><input checked="" type="checkbox"/> Annual Reports (# of reports) 3</td><td>(report filing fee) \$ 20.00</td><td>Total Fees \$ 60.00</td></tr><tr><td><input checked="" type="checkbox"/> Penalty fees (# of years) 2</td><td>(penalty fee) \$ 25.00</td><td>Total Fees \$ 50.00</td></tr><tr><td><input type="checkbox"/> Replacement filing fee \$</td><td></td><td></td></tr><tr><td><input type="checkbox"/> LOGS (Tax Good Standing)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Legislative Act/Court Order</td><td></td><td></td></tr><tr><td><input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 10.</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Change of Registered Office Form - NO FEE</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Certificate of Correction</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Amendment (name change required)</td><td></td><td></td></tr></table> |                                                                                      | <input checked="" type="checkbox"/> Annual Reports (# of reports) 3 | (report filing fee) \$ 20.00 | Total Fees \$ 60.00 | <input checked="" type="checkbox"/> Penalty fees (# of years) 2 | (penalty fee) \$ 25.00 | Total Fees \$ 50.00 | <input type="checkbox"/> Replacement filing fee \$ |  |  | <input type="checkbox"/> LOGS (Tax Good Standing) |  |  | <input type="checkbox"/> Legislative Act/Court Order |  |  | <input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 10. |  |  | <input type="checkbox"/> Change of Registered Office Form - NO FEE |  |  | <input type="checkbox"/> Certificate of Correction |  |  | <input type="checkbox"/> Amendment (name change required) |  |  |
| <input checked="" type="checkbox"/> Annual Reports (# of reports) 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (report filing fee) \$ 20.00                                                         | Total Fees \$ 60.00                                                 |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input checked="" type="checkbox"/> Penalty fees (# of years) 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | (penalty fee) \$ 25.00                                                               | Total Fees \$ 50.00                                                 |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Replacement filing fee \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> LOGS (Tax Good Standing)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Legislative Act/Court Order                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 10.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Change of Registered Office Form - NO FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Certificate of Correction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Amendment (name change required)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 7. Accompanied by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      |                                                                     |                              |                     |                                                                 |                        |                     |                                                    |  |  |                                                   |  |  |                                                      |  |  |                                                                              |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |

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