



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 Corporation  
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 Shepherd, Harvey & Associates, Inc.

SECTION II

It is incorporated under the laws of State: GA Country: 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 07/21/2024

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 10/19/2000

and the period of its duration is  Perpetual

SECTION V

The location of its principal office is

No. and Street: 4855 RIVER GREEN PARKWAY  
SUITE 400

City or Town: DULUTH State: GA Zip: 30096 Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 450 VETERANS MEMORIAL PARKWAY  
SUITE 7A

City or Town: EAST PROVIDENCE State: RI Zip: 02914

and the name of its proposed registered agent in Rhode Island at that address is CT CORPORATION SYSTEM

SECTION VII

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

ENGINEERING DESIGN SERVICES

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).

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT      | JAMES M HARVEY  | 2372 CRIMSON KING DRIVEE<br>BRASELTON, GA 30517 USA               |
| PRESIDENT      | JAMES M HARVEY  | 2372 CRIMSON KING DRIVEE<br>BRASELTON, GA 30517 USA               |
| SECRETARY      | BRADLEY SCOT SHEPHERD JR.                             | 5766 SHADBURN FERRY RD<br>BUFORD, GA 30518 USA                    |
| SECRETARY      | BRADLEY SCOT SHEPHERD JR.                             | 5766 SHADBURN FERRY RD<br>BUFORD, GA 30518 USA                    |
| VICE PRESIDENT | RYAN P SULLIVAN                                       | 4728 STRICKLAND ROAD<br>FLOWERY BRANCH , GA 30542 USA             |
| VICE PRESIDENT | RYAN P SULLIVAN                                       | 4728 STRICKLAND ROAD<br>FLOWERY BRANCH , GA 30542 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).

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT      | JAMES M HARVEY  | 2372 CRIMSON KING DRIVEE<br>BRASELTON, GA 30517 USA               |
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#### 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<br><i>Num of Shares</i> |          |
|----------------|-----------------|---------------------|---|----------|
| CNP            |                 |                     | \$0.0000  | 1,000.00 |

**Signed this 7 Day of June, 2024 at 9:07:44 AM 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 RYAN SULLIVAN

Signature of Authorized Officer of the Corporation

Form No. 150  
Revised 09/07

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*State of Rhode Island*  
*Board of Registration for Professional Engineers*

BE IT KNOWN THAT

*Shepherd, Harvey & Associates, Inc.*

*having given satisfactory evidence of having the  
qualifications required by law is hereby authorized to practice*

**Engineering as a  
Corporation**

*IN THE STATE OF RHODE ISLAND*

Certificate of Authorization No.: PE.0009398-COA

Issued: 7/1/2024

Expires:

Chair

Secretary

**STATE OF GEORGIA**  
**Secretary of State**  
**Corporations Division**  
**313 West Tower**  
**2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

**CERTIFICATE OF EXISTENCE**

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**SHEPHERD, HARVEY AND ASSOCIATES, INC.**  
a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 27353458  
Date Inc/Auth/Filed: 10/19/2000  
Jurisdiction : Georgia  
Print Date : 06/06/2024  
Form Number : 211



*Brad Raffensperger*

**Brad Raffensperger**  
**Secretary of State**



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:

June 07, 2024 09:07 AM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

