



State of Rhode Island
Department of State - Business Services Division

REINSTATEMENT

1. Entity ID Number: 001707823	2. The name of the entity is: Trailside Day Care, Inc																											
3. Date of Revocation: 9/13/2023	4. Reason for Revocation: Annual Report																											
5. Entity Type: Non-Profit Corporation																												
6. The reinstatement requirements are: <table border="0"> <tr> <td>☒ Annual Reports (# of reports) 2</td> <td>(report filing fee) \$ 20</td> <td>Total Fees \$ 40</td> </tr> <tr> <td>☒ Penalty fees (# of years) 1</td> <td>(penalty fee) \$ 25</td> <td>Total Fees \$ 25</td> </tr> <tr> <td>☐ Replacement filing fee \$</td> <td></td> <td></td> </tr> <tr> <td>☐ LOGS (Tax Good Standing)</td> <td></td> <td></td> </tr> <tr> <td>☐ Legislative Act/Court Order</td> <td></td> <td></td> </tr> <tr> <td>☐ Change of Agent Form (filing fee) \$</td> <td></td> <td></td> </tr> <tr> <td>☐ Change of Registered Office Form - NO FEE</td> <td></td> <td></td> </tr> <tr> <td>☐ Certificate of Correction</td> <td></td> <td></td> </tr> <tr> <td>☐ Amendment (name change required)</td> <td></td> <td></td> </tr> </table>		☒ Annual Reports (# of reports) 2	(report filing fee) \$ 20	Total Fees \$ 40	☒ Penalty fees (# of years) 1	(penalty fee) \$ 25	Total Fees \$ 25	☐ Replacement filing fee \$			☐ LOGS (Tax Good Standing)			☐ Legislative Act/Court Order			☐ Change of Agent Form (filing fee) \$			☐ Change of Registered Office Form - NO FEE			☐ Certificate of Correction			☐ Amendment (name change required)		
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7. Accompanied by																												

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BY MKP26