RI SOS Filing Number: 202457558260 Date: 7/2/2024 12:05:00 PM

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State of Rhode Island Department of State - Business Services Division

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of <u>RIGL 7-1,2-1405</u>, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:		-			
PANADIN CONSTRUCTION CORPORATION					
2. It is incorporated under the laws of: MA					
3. The name, if different, which it elects to use in Rhod	de Island is:				
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:					
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:					
4. The date of its incorporation is: 03-01-2011					
And the period of its duration is: CHECK ONE BOX ONLY Perpetual (on-going)					
Date certain for dissolution					
5. The address of its principal office is:		· · · · · · · · · · · · · · · · · · ·			
149 PURCHASE STREET, MILFORD, MA 01757					
6. The name and address of the initial registered agent/office in Rhode Island:					
Agent Name Parasearch, Inc.					
Street Address (NOT a P.O. Box) 222 Jefferson Blvd., Suite 200					
City/Town Warwick	State RHODE ISLAND	Zip Code 02888			

MAIL TO:

Division of Business Services148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL - 2 2024 BY 30355

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:					
CONSTRUCT AND BUILD RESIDENTIAL BUILDINGS					
					
8. (a) The names and restate or country of which	espective addr h it is incorpor	esses of its directors (dated):	ptional, unless	directors are required under the laws of the	
NAME	NAME			ADDRESS	
PAULO SERGIO PEREIRA 149 F		149 PURCHASE	49 PURCHASE STREET MILFORD, MA 01757		
		<u> </u>		Check the box to indicate an attachment	
8. (b) The names and re	espective addr	esses of its principal of	ficers (mandato	bry if directors are not required under the laws	
of the state or country of			(, , , , , , , , , , , , , , , , , , ,	
OFFICE	NAME		ADDRESS		
PRESIDENT	PAULO SERGIO PEREIRA		149 PURCHASE STREET MILFORD, MA 01757		
VICE PRESIDENT					
TREASURER	PAULO SERGIO PEREIRA		149 PURC	HASE STREET MILFORD, MA 01757	
SECRETARY	PAULO SERGIO PEREIRA		149 PURC	149 PURCHASE STREET MILFORD, MA 01757	
			<u> </u>	Check the box to indicate an attachment	
9. The aggregate numb par value, and series, it			issue; itemized	by classes, par value of shares, shares without	
NUMBER OF SHARES	CLA		SERIES	PAR VALUE OR STATE NO PAR VALUE	
200,000	Commoi	n		0	
		<u> </u>			
				e of the property of the corporation to be operty of the corporation to be owned during	
the following year, whe					
0 "	,				
<u> </u>	Ó				
11. An estimate, as a	percentage, o	f the proportion of the g	ross amount of	business to be transacted by the corporation	
at or from places of bus	siness in Rhod	le Island during the folk	owing year com	pared to the gross amount thereof which will be obtained from worksheet.)	
0 ,					
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12. This application must be accompanied by a <u>Certificate of Good</u> stream of the date of this filing.	Standing/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective: CHECK (ONE BOX ONLY
✓ Date received (Upon filing)	
Later effective date (Date must be no more than 90 days from t	he date of filing)
14. Under penalty of perjury, I declare and affirm that I have examine any accompanying attachments, and that all statements contained h	ed this Application for Certificate of Authority, including perein are true and correct.
Type or Print Name of Authorized Officer	Date
PAULO SERGIO PEREIRA	3/28/24
Signature of Authorized Officer of the Corporation	
Laulo Lereira	



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

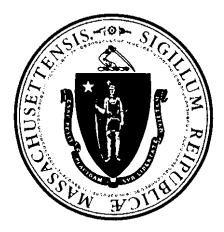
Date: July 01, 2024

To Whom It May Concern:

I hereby certify that according to the records of this office,

PANADIN CONSTRUCTION CORPORATION

Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,

I have hereunto affixed the

Great Scal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Min Tranino Galein

Certificate Number: 24060474120

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: cmo

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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:

July 02, 2024 12:05 PM

Gregg M. Amore
Secretary of State

Tregs M. Coure

