



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 Cor Partners, Inc.

SECTION II

It is incorporated under the laws of State: MO 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

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 6/2/2017

and the period of its duration is Perpetual

SECTION V

The location of its principal office is

No. and Street: 5565 GLENRIDGE CONNECTOR, SUITE 900

City or Town: ATLANTA State: GA Zip: 30342 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 C T CORPORATION SYSTEM

SECTION VII

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

RISK MANAGEMENT CLAIMS ADJUSTING AND CONSULTING RELATED 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).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN J QUINN	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
TREASURER	MICHAEL BAVELY	5565 GLENRIDGE CONNECGTOR, SUITE 900 ATLANTA, GA 30342 USA
SECRETARY	GREGORY L COONROD	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
VICE PRESIDENT	MELISSA CHRIST	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	RYAN GABLE	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	WILLIAM K CHAPMAN	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	GREGORY L COONROD	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	JOHN J QUINN	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 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	JOHN J QUINN	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
TREASURER	MICHAEL BAVELY	5565 GLENRIDGE CONNECGTOR, SUITE 900 ATLANTA, GA 30342 USA
SECRETARY	GREGORY L COONROD	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
VICE PRESIDENT	MELISSA CHRIST	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	RYAN GABLE	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	WILLIAM K CHAPMAN	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	GREGORY L COONROD	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 USA
DIRECTOR	JOHN J QUINN	5565 GLENRIDGE CONNECTOR, SUITE 900 ATLANTA, GA 30342 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 <i>Num of Shares</i>
CNP			\$0.0000 100.00

Signed this 18 Day of September, 2024 at 2:07:48 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 MICHAEL BAVELY
Signature of Authorized Officer of the Corporation

Form No. 150
Revised 09/07

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STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

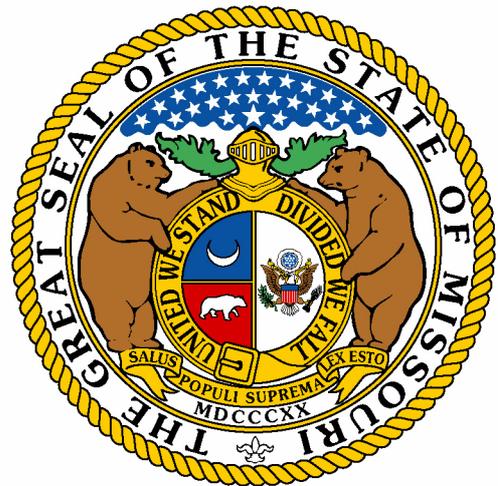
I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

Cor Partners, Inc.
001371609

was created under the laws of this State on the 2nd day of June, 2017, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 18th day of September, 2024.


Secretary of State



Certification Number: CERT-09182024-0043



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:

September 18, 2024 02:05 PM

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

Gregg M. Amore
Secretary of State

