



State of Rhode Island
 Department of State - Business Services Division

REINSTATEMENT

1. Entity ID Number: 122575	2. The name of the entity is: Rhode Island Disaster Medical Assistance Team, Inc.
3. Date of Revocation: 9/16/2024	4. Reason for Revocation: Annual Report
5. Entity Type: Non-Profit Corporation	
6. The reinstatement requirements are: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Annual Reports (# of reports) 1 (report filing fee) \$ 20.00 Total Fees \$ 20.00 <input checked="" type="checkbox"/> Penalty fees (# of years) 1 (penalty fee) \$ 25.00 Total Fees \$ 25.00 <input type="checkbox"/> Replacement filing fee \$ <input type="checkbox"/> LOGS (Tax Good Standing) <input type="checkbox"/> Legislative Act/Court Order <input type="checkbox"/> Change of Agent Form (filing fee) \$ <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	

FILED

OCT 15 2024

BY ONZBV

AA. 12:21