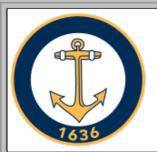
RI SOS Filing Number: 202562580460 Date: 1/15/2025 10:35:00 AM



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 MRO CORPORATION

SECTION II

It is incorporated under the laws of State: PA 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 3/21/2002

and the period of its duration is X Perpetual

SECTION V

The location of its principal office is

No. and Street: 1000 MADISON AVENUE, SUITE 100

City or Town: NORRISTOWN State: PA Zip: 19403 Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BOULEVARD

City or Town: $\underline{WARWICK}$ State: RI Zip: $\underline{02888}$

and the name of its proposed registered agent in Rhode Island at that address is **COGENCY GLOBAL INC.**

SECTION VII

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

PROCESS MEDICAL RECORD REQUESTS FOR CLIENT HEALTHCARE PROVIDERS.

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	JASON BROWN CEO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA		
VICE PRESIDENT	NATHAN EASTMAN CFO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA		
TREASURER, VP CONTROLLER	JOHAN FLOSTRAND	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA		
DIRECTOR	JASON BROWN CEO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA		
DIRECTOR	NATHAN EASTMAN CFO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA		
DIRECTOR	JOHAN FLOSTRAND	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 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).

,	, and an addition of the state				
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country			
PRESIDENT	JASON BROWN CEO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA			
VICE PRESIDENT	NATHAN EASTMAN CFO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA			
TREASURER, VP CONTROLLER	JOHAN FLOSTRAND	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA			
DIRECTOR	JASON BROWN CEO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA			
DIRECTOR	NATHAN EASTMAN CFO	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 USA			
DIRECTOR	JOHAN FLOSTRAND	1000 MADISON AVENUE, SUITE 100 NORRISTOWN, PA 19403 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 Num of Shares	
CWP		VOTIN	\$0.0100	1,000.00

Signed this 15 Day of January, 2025 at 10:36:29 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 JOHAN FLOSTRAND

Signature of Authorized Officer of the Corporation

Form No. 150 Revised 09/07

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Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Regarding: MRO CORPORATION

Request Type: Subsistence Certificate Issuance Date: January 14, 2025

Receipt No.: 001381088

Filing Type: Domestic Business Corporation

Filing Subtype: Business

Initial Filing Date: March 21, 2002

Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

MRO CORPORATION

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

Albert Schmidt

Secretary of the Commonwealth

Men Schmid

Verify this certificate online at www.file.dos.pa.gov

RI SOS Filing Number: 202562580460 Date: 1/15/2025 10:35:00 AM



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:

January 15, 2025 10:35 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

