



State of Rhode Island
Department of State - Business Services Division

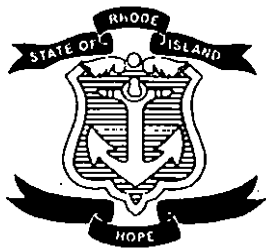
REINSTATEMENT

1. Entity ID Number: 000060593	2. The name of the entity is: Smith and Company Maintenance Inc																											
3. Date of Revocation: 05-01-2008	4. Reason for Revocation: Registered Office																											
5. Entity Type: Domestic Business Corporation																												
6. The reinstatement requirements are: <table border="0"> <tr> <td><input checked="" type="checkbox"/> Annual Reports (# of reports) 18</td> <td>(report filing fee) \$ 50</td> <td>Total Fees \$ 900</td> </tr> <tr> <td><input checked="" type="checkbox"/> Penalty fees (# of years) 17</td> <td>(penalty fee) \$ 50</td> <td>Total Fees \$ 850</td> </tr> <tr> <td><input type="checkbox"/> Replacement filing fee \$</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> LOGS (Tax Good Standing)</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Legislative Act/Court Order</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 20</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Change of Registered Office Form - NO FEE</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certificate of Correction</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Amendment (name change required)</td> <td></td> <td></td> </tr> </table>		<input checked="" type="checkbox"/> Annual Reports (# of reports) 18	(report filing fee) \$ 50	Total Fees \$ 900	<input checked="" type="checkbox"/> Penalty fees (# of years) 17	(penalty fee) \$ 50	Total Fees \$ 850	<input type="checkbox"/> Replacement filing fee \$			<input type="checkbox"/> LOGS (Tax Good Standing)			<input type="checkbox"/> Legislative Act/Court Order			<input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 20			<input type="checkbox"/> Change of Registered Office Form - NO FEE			<input type="checkbox"/> Certificate of Correction			<input type="checkbox"/> Amendment (name change required)		
<input checked="" type="checkbox"/> Annual Reports (# of reports) 18	(report filing fee) \$ 50	Total Fees \$ 900																										
<input checked="" type="checkbox"/> Penalty fees (# of years) 17	(penalty fee) \$ 50	Total Fees \$ 850																										
<input type="checkbox"/> Replacement filing fee \$																												
<input type="checkbox"/> LOGS (Tax Good Standing)																												
<input type="checkbox"/> Legislative Act/Court Order																												
<input checked="" type="checkbox"/> Change of Agent Form (filing fee) \$ 20																												
<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

JAN 16 2025

BY QhawT7
401 14



STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

SMITH AND COMPANY MAINTENANCE INC
PO BOX 4358
MIDDLETOWN, RI 02842-0358

LETTER OF GOOD STANDING

It appears from our records that SMITH AND COMPANY MAINTENANCE INC has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. SMITH AND COMPANY MAINTENANCE INC is in good standing with the Rhode Island Division of Taxation as of 01/15/2025. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above named corporation for the purpose of:

REINSTATEMENT OF REVOKED CORPORATE CHARTER

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

IAN BEAUREGARD
Supervising Revenue Officer

Ncena Savage
Tax Administrator

050453474:22551228
DLN: 10018662603