



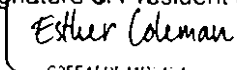
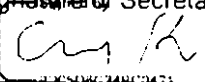
State of Rhode Island  
Department of State - Business Services Division

2025 FEB 20 AM 9:55

**Certificate of Withdrawal**  
FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-6-83, the undersigned foreign non-profit corporation hereby applies for a Certificate of Withdrawal from the state of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number.  001757129	2. The name of the corporation is:  MOTHERS OUTREACH NETWORK INC
3. It is incorporated under the laws of: WASHINGTON, DC	4. The corporation is not transacting business in this state and surrenders its authority to transact business in this state.
5. It revokes the authority of its agent to accept service of process and consents that service of process in any action, suit or proceeding arising out of the transaction of business in the state of Rhode Island, may thereafter be made on the non-profit corporation by service thereof on the Department of State of the State of Rhode Island.	
6. The post office address to which the Department of State may mail a copy of any process against the corporation that is served on the Department of State.  612 G ST SW, WASHINGTON DC 20024	
Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Withdrawal, and that all statements contained herein are true and correct.	
Type or Print the Name of <input checked="" type="checkbox"/> President or <input type="checkbox"/> Vice President  ESTHER COLEMAN	Date 2/8/2025
Signature of President or Vice President  C2FEA0D41D:41:4	
Type or Print the Name of <input checked="" type="checkbox"/> Secretary or <input type="checkbox"/> Assistant Secretary  CATHY KREBS	Date 2/6/2025
Signature of Secretary or Assistant Secretary  21X5D8E74BC0471	

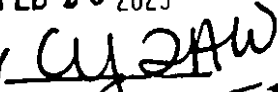
TWO SIGNATURES ARE REQUIRED

**MAIL TO:**

Division of Business Services  
148 W River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

**FILED**

FEB 20 2025

BY   
AA. 9:55 AM

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



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:

February 20, 2025 09:55 AM

A handwritten signature in black ink, reading "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

