

REINSTATEMENT

1. Entity ID Number:	2. The name of the entity is:				
001717599	Crowe Choice Insurance and Financial Services LLC				
3. Date of Revocation:	4. Reason for Revocation:				
09-17-2024	Annual Re	eport			
5. Entity Type:	·		_		
Limited Liability Company					
6. The reinstatement requirement	ls are:			···	
Annual Reports (# of reports) 2	(report filing fee)	\$ 50	Total Fees \$	100
Penalty fees (# of years)	1	(penalty fee)	\$ 50	Total Fees \$ {	50
Replacement filing fee \$					
LOGS (Tax Good Standing)					
Legislative Act/Court Order					
Change of Agent Form (filing fee) \$					
Change of Registered Office Form - NO FEE					
Certificate of Correction					
Amendment (name change required)					
7. Accompanied by					

FILED



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

CROWE CHOICE INSURANCE AND FINANCIAL SERVICES LLC ATTN: SHANNON CROWE 45 RESERVOIR RD COVENTRY, RI 02816-6461

LETTER OF GOOD STANDING

It appears from our records that Crowe Choice Insurance and Financial Services LLC has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. Crowe Choice Insurance and Financial Services LLC is in good standing with the Rhode Island Division of Taxation as of 03/07/2025. 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 <u>only</u> for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

NICOLE BROADY

Supervising Revenue Officer

Neena Savage

Tax Administrator

861577653:22609640 DLN: 10019032335