



State of Rhode Island
Department of State - Business Services Division

Certificate of Correction

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

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RI DEPT. OF STATE
BUS SVCS DIV
2025 JUN 16 P 3:20

Pursuant to the provisions of RIGL 7-1.2-105 the undersigned corporation hereby submits the following Certificate of Correction:

1. Entity ID Number: 001770931	2. The name of the corporation is: Engineers-Architects, P.C.
3. The document to be corrected is: Certificate of Authority	4. The date the document being corrected was originally filed: 03/13/2024
5. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgment: SECTION 9: Par Value of Class A stock is \$1,106.00, Total Authorized Shares 25.00, Total Issued Shares 0.00 SECTION 9: Par Value of Class B stock is \$385, Total Authorized Shares 25.00, Total Issued Shares 0.00 SECTION 8: Leap Chear Address 101 N Phillips Avenue, Suite 300, Sioux Falls SD 57104 Check the box to indicate an attachment ☐	
6. The new corrected portion of the document states as follows: SECTION 9: Par Value of Class A stock is \$25, Total Authorized Shares 10,000 SECTION 9: Par Value of Class B stock is \$25, Total Authorized Shares 10,000 SECTION 8: Leap Chear Address 525 N Weber Avenue, Sioux Falls, SD 57103 Check the box to indicate an attachment ☐	
7. The corrected document MUST be attached to this certificate.	
8. As required by RIGL <u>7-1.2-105</u> , the entity has paid all fees and taxes.	

MAIL TO:

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

FILED

JUN 16 2025 3:20pm

BY LKS 12V9Z

9. Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Authorized Officer of the Corporation

Wayne G Dietrich

Date

5.5.2025

Signature of Authorized Officer of the Corporation

Wayne G. Dietrich



State of Rhode Island
Department of State - Business Services Division

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

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2025 JUN 16 P 3:20

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2025 MAY 13 AM 8:01

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is: Engineers-Architects, P.C.		
2. It is incorporated under the laws of: North Dakota		
3. The name, if different, which it elects to use in Rhode Island is: (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: EAPC Architects Engineers (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:		
4. The date of its incorporation is: 01/20/1967 And the period of its duration is: CHECK ONE BOX ONLY ☒ Perpetual (on-going) ☐ Date certain for dissolution _____		
5. The address of its principal office is: 3100 Demers Ave, Grand Forks, ND 58201		
6. The name and address of the initial registered agent/office in Rhode Island: Agent Name C T Corporation Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Ste 7A City/Town East Providence State RHODE ISLAND Zip Code 02914		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

STAMP

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

Architecture and structural, mechanical and electrical engineering services.

8. (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):

NAME	ADDRESS

Check the box to indicate an attachment ☐

8. (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):

OFFICE	NAME	ADDRESS
PRESIDENT	Alan Dostert	112 N Roberts St, Ste 100, Fargo, ND 58102
VICE PRESIDENT	Anthony Corcoran	112 N Roberts St, Ste 100, Fargo, ND 58102
TREASURER	Wayne G Dietrich	3100 Demers Ave, Grand Forks, ND 58201
SECRETARY	Samuel Wilke	112 N Roberts St, Ste 100, Fargo, ND 58102

Check the box to indicate an attachment ☒

9. 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:

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
10,000	CWP	A	25
10,000	CWP	B	25

10. An estimate, **as a percentage**, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. (Note: Percentage obtained from worksheet.)

0 %

11. An estimate, **as a percentage**, of the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. (Note: Percentage obtained from worksheet.)

0 %

Additional Officers and Directors

James Tyler, CEO, 116 W Main Ave, Bismarck, ND 58501

Cory Vaughn, CFO, 222 Third St W, Bemidji, MN 56601

Leap Chear, Partner, 525 N Weber Avenue, Sioux Falls, SD 57103

Sean Sugden, Partner, 112 N Roberts St, Ste 100, Fargo, ND 58102

12. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 90 days of the date of this filing.

13. Date when the Certificate of Authority will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) _____

14. *Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of Authorized Officer

Wayne G Dietrich

Date

5.5.2025

Signature of Authorized Officer of the Corporation

Wayne G. Dietrich



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:

June 16, 2025 03:20 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized and prominent.

Gregg M. Amore
Secretary of State

