RI SOS Filing Number: 202577273490 Date: 7/30/2025 2:12:00 PM



## State of Rhode Island Office of the Secretary of State

Fee: \$310.0

Zip: 02888

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 **PGP TITLE**, **INC**.

SECTION II

It is incorporated under the laws of State: NV 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 5/8/1995

and the period of its duration is X Perpetual

**SECTION V** 

The location of its principal office is

No. and Street: 9111 CYPRESS WATERS BLVD

**SUITE 200** 

City or Town: COPPELL State: TX Zip: 75019 Country: USA

**SECTION VI** 

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BOULEVARD

SUITE 200 WARWICK

and the name of its proposed registered agent in Rhode Island at that address is  $\underline{CORPORATION}$   $\underline{SERVICE}$   $\underline{COMPANY}$ 

**SECTION VII** 

State: RI

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

**TITLE AGENT** 

City or Town:

**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	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	

SARA TRUEMPER	9111 CYPRESS WATERS BLVD, SUITE 200 COPPELL, TX 75019 USA	
COLLEEN OXBROUGH	6900 E LAYTON AVE, SUITE 1500 DENVER, CO 80237 USA	
MICHAEL K SULLIVAN	6900 E LAYTON AVE, SUITE 1500 DENVER, CO 80237 USA	
SARA TRUEMPER	9111 CYPRESS WATERS BLVD, SUITE 200 COPPELL, TX 75019 USA	
COLLEEN OXBROUGH	6900 E LAYTON AVE, SUITE 1500 DENVER, CO 80237 USA	
GREGORY PATTEE	9111 CYPRESS WATERS BLVD, SUITE 200 COPPELL, TX 75019 USA	
	COLLEEN OXBROUGH  MICHAEL K SULLIVAN  SARA TRUEMPER  COLLEEN OXBROUGH	

(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).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	SARA TRUEMPER	9111 CYPRESS WATERS BLVD, SUITE 200 COPPELL, TX 75019 USA	
TREASURER	COLLEEN OXBROUGH	6900 E LAYTON AVE, SUITE 1500 DENVER, CO 80237 USA	
SECRETARY	MICHAEL K SULLIVAN	6900 E LAYTON AVE, SUITE 1500 DENVER, CO 80237 USA	
DIRECTOR	SARA TRUEMPER	9111 CYPRESS WATERS BLVD, SUITE 200 COPPELL, TX 75019 USA	
DIRECTOR	COLLEEN OXBROUGH	EEN OXBROUGH 6900 E LAYTON AVE, SUITE 1500 DENVER, CO 80237 USA	
DIRECTOR	GREGORY PATTEE	9111 CYPRESS WATERS BLVD, SUITE 200 COPPELL, TX 75019 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	
ı	CWP			\$1.0000	1,000.00

**Signed this 30 Day of July, 2025 at 2:14:10 PM 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 MICHAEL K SULLIVAN

Signature of Authorized Officer of the Corporation

Form No. 150 Revised 09/07





## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence **PGP TITLE, INC.** as a DOMESTIC CORPORATION (78) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 05/08/1995, and in good standing in this State.

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Certificate Number: B202507285944450

You may verify this certificate

online at https://www.nvsilverflume.gov/home

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of this State, at my office on 07/28/2025.

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FRANCISCO V. AGUILAR Secretary of State

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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:

July 30, 2025 02:12 PM

Gregg M. Amore Secretary of State

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