State of Rhode Island
Department of State - Business Services Division

REINSTATEMENT

1. Entity ID Number:	2. The name of the entity is:
000034475	NEUROSURGERY FOUNDATION, INC.
3. Date of Revocation:	4. Reason for Revocation:
09/26/2025	Annual Report

5. Entity Type:

Non-Profit Corporation

6. The reinstatement requirements are:

- [x] Annual Reports (# of reports) 1 (report filing fee) $ 20 Total Fees $ 20
- [x] Penalty fees (# of years) 1 (penalty fee) $ 25 Total Fees $ 25
- [ ] 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
OCT 06 2025
BY