RI SOS Filing Number: 202188919370 Date: 1/29/2021 4:00:00 PM

Department of S	UIVISION	FILEDSTAMP					
Corporation	_	JAN 29 2021 FOR					
→ Filing period: January 1							
→ Filing Fee: \$50.00→ Penalty: Additional \$25.0	0 fee if form is no	ot filed by April 1.		ВУ	, <u> </u>	290 T8 Q	
Entity ID Number	2. Exact name of the Corporation						
789789	D'AMATO (CONSTRUCTION	COMPANY, IN	NC.			
3 Principal Office Address	-		City		State	Zıp	
400 Middle Street			Bristol		CT	06010	
4. NAICS Code	6. Brief descr	iption of the chara	cter of business	conducted in Rhode Is	sland		
237110	GENERAL (GENERAL CONSTRUCTION PROJECTS					
5. State of Incorporation							
CONNECTICUT						· · · · · · · · · · · · · · · · · · ·	
7. List ALL officers (names and President Name			Vice-Presider	al Nama		ndicate an attachment	
Edward D'Amato			Edward D Amato, Jr.				
Street Address 216 Peck Lane			Street Address 29 Patricia Drive				
City Bristol	State CT	^{Zip} 06010	City Bristol		State CT	Zip 06010	
		06010				(/6010	
Secretary Name Susan Henne			Treasurer Na	me Edward D'Amato			
Street Address 35 Concetta Land	•		Street Addres	As above		· -	
City Bristol	State CT	^{Zip} 06010	City		State	Zıp	
8. List ALL directors (names an	d addresses)				the box to	indicate an attachment 🗆	
Director Name None			Director Nam	e			
Street Address			Street Addres	SS			
City	State	Zip	City		State	Zip	
					0.0.0		
Director Name			Director Name				
Street Address			Street Addres	SS			
City	State	Zip	City	- <u>-</u>	State	Zip	
City	State	Ziμ	City		State	Zip	
9. Shares Authorized	acated in the	10. Shares Is	SUED OF SHARES	Check CLASS/SERIE		indicate an attachment PAR VALUE	
This information is currently of record in the Department of State.			100		·	\$100.	
Changes require an additional filing.						\$100 .	
	_						
 This report must be execute trustee, this report must be exe 					ration is in	the hands of a receiver or	
Under penalty of perjury, I de	clare and affirm t	that I have examii	ned this report,		npanying s	chedules and	
statements, and that all state Name of Authorized Represent		herein are true a	nd correct.		Date		
Edward D'Amato, Jr.					1.25.21		
Signature of Authorized Repres	sentative				1		
olginotaro di Mathonizea Nepres							
		=					

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov