



State of Rhode Island
Department of State - Business Services Division

Instructions for Filing Certificate of Correction for a Domestic Corporation

[Section 7-1.2-105](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

All filings are public records under RIGL [38-2-1](#), et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

This legal document should be typed. All illegible documents will be REJECTED.

How to complete the form:

1. List the entity's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#).
2. List the name of the corporation. The entity name can be verified through our [Corporate Database](#).
3. State the document that needs to be corrected.
4. State the date the document being corrected was originally filed.
5. State what was incorrect on the original document that was filed.
6. State the corrected portion of the document.
7. The corrected **AND** completed document **MUST** be included with this application.
8. The entity has paid all fees and taxes.
9. An Authorized Officer of the entity **MUST** sign and date the form.

How to pay the filing fee:

The filing fee is \$50, payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will **NOT** result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#)
- Enter the name or ID number of your entity and click "Search"
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing"
- Identify desired type of filing and click on "PDF" under "View PDF" to view and print the record

How to maintain your status:

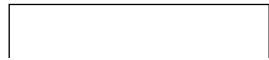
The corporation is responsible for filing an annual report each calendar year, excluding the year of incorporation, between January 1 and March 1. A courtesy reminder will be mailed to the registered agent prior to January 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office will result in the revocation of the Certificate of Incorporation pursuant to RIGL [7-1.2-1310](#).

Your business may require additional licensing. Please visit our [website](#) for further information.



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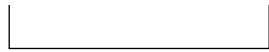
Certificate of Correction
DOMESTIC Business Corporation

STAMP

FOR
SECRETARY OF STATE
USE ONLY

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL [7-1.2-105](#) the undersigned corporation hereby submits the following Certificate of Correction:



1. Entity ID Number:	2. The name of the corporation is:
3. The document to be corrected is:	4. The date the document being corrected was originally filed:
5. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgment: <div style="text-align: right;">Check the box to indicate an attachment</div>	
6. The new corrected portion of the document states as follows: <div style="text-align: right;">Check the box to indicate an attachment</div>	
7. The corrected document MUST be attached to this certificate.	
8. As required by RIGL 7-1.2-105 , 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



STAMP

FOR
SECRETARY OF STATE
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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

Date

Signature of Authorized Officer of the Corporation



Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. All fields are REQUIRED.

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: