

State of New Hampshire

Department of State



5/27/2020 8:34:42 AM

Concord Search & Retrieval, Inc.
10 Ferry Street, Suite 313
Concord, NH, 03301, USA

Enclosed is the acknowledgment copy of your creation filing. It acknowledges this office's receipt and filing of your documents.

Any nonprofit organization that 1) will be applying to the IRS to be a 501(c)(3) organization and/or 2) will solicit donations or distribute funds in the state of N.H. and/or 3) is formed for any purpose enumerated in RSA 7:21, II is required to register with and report to the Attorney General, Charitable Trusts Unit, NH Department of Justice, 33 Capitol St, Concord, NH 03301 (603) 271-3658.

Subsequent to filing with the secretary of state a copy of the document must be filed in the office of the clerk of the town in which the business address of the corporation is located.

Your organization is required to file a Non-Profit report and pay a \$25.00 filing fee every fifth year (i.e. 2015, 2020) due by December 31st of the filing year. As a courtesy our office will send a reminder notice in January of the filing year by mail or email. Non-Profit reports may be filed on-line or downloaded from our website at <https://quickstart.sos.nh.gov/online>.

If you are unable to obtain a report through our website, you should contact this office to request one.

Please Note: It is your organization's responsibility to obtain a report and submit for filing prior to December 31st of the filing year.

Failure to file the non-profit reports and/or fees will result in the administrative dissolution or suspension of the non-profit organization.

Should you have any questions, you may contact the Corporation Division at the phone number or email address below. Please reference your Business ID Number when contacting our office.

Sincerely,
Corporation Division

Business ID: **842949**
Filing No: **4921123**

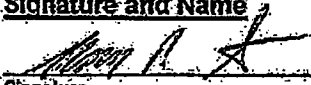
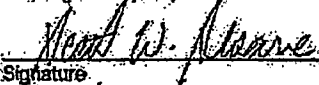
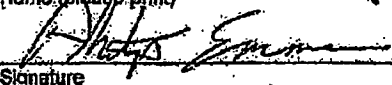
SIXTH: The amount of capital stock, if any, or the number of shares or membership certificates, if any, and provisions for retirement, reacquisition and redemption of those shares or certificates are:

The Corporation is a non stock corporation.

SEVENTH: Provision eliminating or limiting the personal liability of a director, an officer or both, to the corporation or its shareholders for monetary damages for breach of fiduciary duty as a director, an officer or both is (Note 1). To the fullest extent permitted by law, a Trustee.

Officer or Committee member of the Corporation shall not be personally liable for monetary damages for any action taken, or the failure to take any action.

EIGHTH: Signatures and post office address of each of the persons associating together to form the corporation: (Note 2)

<u>Signature and Name</u>	<u>Post Office Address</u>
1. <u></u> Signature <u>Robert A. Stegmeyer</u> Name (please print)	<u>250 PLEASANT ST</u> Street <u>CONCORD NH 03301</u> City/Town State Zip
2. <u></u> Signature <u>Scott W. Sloane</u> Name (please print)	<u>250 Pleasant St.</u> Street <u>CONCORD NH 03301</u> City/Town State Zip
3. _____ Signature <u>David Ruedra</u> Name (please print)	_____ Street _____ City/Town State Zip
4. <u></u> Signature <u>Philip Emma</u> Name (please print)	<u>250 PLEASANT ST</u> Street <u>CONCORD NH 03301</u> City/Town State Zip
5. _____ Signature <u>Sol Asmar</u> Name (please print)	_____ Street _____ City/Town State Zip

Notes: 1. If no provision eliminating or limiting personal liability, insert "NONE".

2. At least five signatures are required.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989
Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH

ARTICLES OF AGREEMENT

Form NP-1
(Cont.)

SIXTH: The amount of capital stock, if any, or the number of shares or membership certificates, if any, and provisions for retirement, reacquisition and redemption of those shares or certificates are:

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Officer or Committee member of the Corporation shall not be personally liable for monetary

damages for any action taken, or the failure to take any action.

EIGHTH: Signatures and post office address of each of the persons associating together to form the corporation. (Note 2)

Signature and Name		Post Office Address		
1.	<p>Signature: <u>[Signature]</u></p> <p>Name (please print): <u>Robert P. Stegmeyer</u></p>	<p>Street: <u>250 Pleasant St</u></p> <p>City/Town: <u>Concord</u> State: <u>NH</u> Zip: <u>03301</u></p>		
2.	<p>Signature: <u>[Signature]</u></p> <p>Name (please print): <u>Scott W. Stearns</u></p>	<p>Street: <u>250 Pleasant St</u></p> <p>City/Town: <u>Concord</u> State: <u>NH</u> Zip: <u>03301</u></p>		
3.	<p>Signature: <u>[Signature]</u></p> <p>Name (please print): <u>David Rueding</u></p>	<p>Street: _____</p> <p>City/Town: _____ State: _____ Zip: _____</p>		
4.	<p>Signature: <u>[Signature]</u></p> <p>Name (please print): <u>Philo Emma</u></p>	<p>Street: _____</p> <p>City/Town: _____ State: _____ Zip: _____</p>		
5.	<p>Signature: <u>[Signature]</u></p> <p>Name (please print): <u>Sol Asmar</u></p>	<p>Street: <u>40 Kimball st</u></p> <p>City/Town: <u>Concord</u> State: <u>NH</u> Zip: <u>03301</u></p>		

- Notes: 1. If no provision eliminating or limiting personal liability, insert "NONE".
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Officer or Committee member of the Corporation shall not be personally liable for monetary damages for any action taken, or the failure to take any action:

EIGHTH: Signatures and post office address of each of the persons associating together to form the corporation: (Note 2)

Signature and Name

Post Office Address

[Signature]

250 Pleasant St

Signature
Robene P. Steigmeier

Street
Concord NH 03301

Name (please print)

City/Town State Zip

[Signature]

250 Pleasant St

Signature
Scott W. Silbane

Street
Concord NH 03301

Name (please print)

City/Town State Zip

[Signature]

250 Pleasant St

Signature
David P. Udick

Street
Concord NH 03301

Name (please print)

City/Town State Zip

[Signature]

Street

Signature
Phyllis Emma

City/Town State Zip

Name (please print)

[Signature]

Street

Name (please print)

City/Town State Zip

Note: 1. If no provision eliminating or limiting personal liability, insert "NONE"

2. At least five signatures are required

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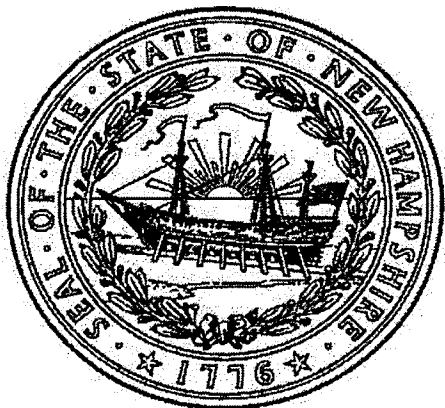
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Physical Location: State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH

State of New Hampshire
Department of State

CERTIFICATE OF EXISTENCE
OF
CONCORD HOSPITAL - LACONIA

This is to certify that **CONCORD HOSPITAL - LACONIA** is registered in this office as a **New Hampshire Nonprofit Corporation** to transact business in New Hampshire on 5/18/2020 4:30:00 PM.

Business ID: **842949**



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 18th day of May A.D. 2020.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State