Filing Fee: \$150.00 ID Number			
THO IT WAS	STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State	12	

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

2010 DEC 23 AH 9:

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

	and the trace purpose substitute the following state ment.				
1.	The name of the limited liability company is: SEI RI, LLC				
2.	The name, if different, under which it proposes to register	and transact business in Rh	node Island is:		
3.	The limited liability company is organized under the laws	of GEORGIA			
4.	The date of its organization is November 30, 2010				
5.	The period of duration of the limited liability company is (if	perpetual, so state) PERF	PETUAL		
6.	The address of the limited liability company's resident agent in Rhode Island is:				
	155 South Main Street	PROVIDENCE	, RI 02903		
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)		
	and the name of the resident agent at such address is	CT CORPORATION SYSTE	М		
		(Name of	Agent)		
7.	The secretary of state is appointed the agent of the fore time there is no resident agent or if the resident agent can diligence.	ign limited liability company nnot be found or served folk	for service of process if at any owing the exercise of reasonable		
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:				
	3108 PIEDMONT ROAD, SUITE 202				
	ATLANTA,GA 30305	····			
Э.	The mailing address for the limited liability company is: 3108 PIEDMONT ROAD, SUITE 202				
	ATLANIA, GA 30305		····		
		The State St			

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10.	Management of the Limited Liability Company: The limited liability company is to be managed by its members. (If you have checked this box, go to item no. 11.)				
A.					
		<u>or</u>			
В.		be managed very by one (1) or more managers. (If the limited liability me of the filing of these Articles of Organization, state the name and			
	<u>Manager</u>	<u>Address</u>			
S	El/Aaron's Inc.	3108 Piedmont Road Suite 202 Atlanta, GA 30305			
11. Th	is application is accompanied by a cer	tificate of good standing duly authenticated by the secretary of state or other			
au	monzed officer of the jurisdiction under	Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.			
Date:	12/15/2010	Print Exact Name of Limited Liability Company Making Application By Signature of authorized person			

Control No. 10082579

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

SEI RI, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 11/30/2010 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 3rd day of December, 2010

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 6265231-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

