Filing Fee: \$150.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

HAR 12 PH 1:

INTERPOLATION OF THE PROPERTY OF THE PROPERTY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, I956, 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:

	-				
1.	The name of the limited liability company is:				
	ECCO RIDE LLC				
	This company has been duly organized in its state of formation as a low-profit limited liability company. (Check box if applicable)				
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:				
3.	The limited liability company is organized under the laws of Delaware				
4.	. The date of its organization is July 8, 2013				
5.	i. The period of duration of the limited liability company is (if perpetual, so state) perpetual				
6.	The address of the limited liability company's resident agent in Rhode Island is:				
	86 Weybosset 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 Rodio & Ursillo, Ltd.				
		(Name of A	Agent)		
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at an time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.				
The address of any office required to be maintained in the state or other jurisdiction limited liability company is organized is:			on under the laws of which the		
	n/a				
9.	The mailing address for the limited liability company	/ is:			
	11 Sharpe Drive, Cranston, RI 02920				
	7		FILED 1:04		
		- -	MAR 12 2014		
For	m No. 450		WIAN I & CUIT		

Form No. 450 Revised: 07/12 Bv 219768

KM

40	Barrer	A Company (shock and apply):			
10.	Management of the Limited Liability	Company (check one only).			
Α	. The limited liability company is to be No. 11 – DO NOT LIST ANY NAME	e managed very by its members. (If you have checked this box, go to item ES IN SECTION B.)			
	<u>or</u>				
В	B. The limited liability company is to be managed by one (1) or more managers. (If the limited company has managers at the time of the filing of these Articles of Organization, state the na address of each manager.)				
	<u>Manager</u>	Address			
	- · · · · · · · · · · · · · · · · · · ·				
	•				
a	. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or othe authorized officer of the jurisdiction under which the foreign limited liability company was organized.				
	he date this Application for Registratio nmediately upon filing	on is to become effective, if later than the date of filing, is:			
		an 30 days after, the filing of this Application for Registration)			
	(100 p. 100 to 5)	er e			
		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:	2/28/14	ECCO RIDE LLC			
24.0.		Print Exact Name of Limited Liability Company Making Application			
		By Signature of Authorized Person			
		Troms U. Mc Conghey			

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ECCO RIDE LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW,

AS OF THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2014.

5362411 8300

140265769

AUTHENTY CATION: 1170021

DATE: 02-28-14

You may verify this certificate online at corp.delaware.gov/authver.shtml



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

