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

2014 AUG 13 PH 2: 34

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:

	Coquette Closette, 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	mpany. (Check box in Rhode Island is	f applicable)		
3.	The limited liability company is organized under the laws of Delaware					
4.	The date of its organization is04-09-2014					
5.	The period of duration of the limited liability company is (if perp	petual, so state)	Perpetual	ي ر		
6.						
	450 Veterans Memorial Parkway, Suite 7A	East Providence	, RI	02914		
	(Street Address, not P.O. Box)	(City/Town)	, NI	(Zip Code		
	and the name of the recident and the			(C.P 0000)		
	and the name of the resident agent at such address is	(Name o	poration System of Agent)			
8.	The secretary of state is appointed the agent of the foreign lir time there is no resident agent or if the resident agent cannot be diligence. The address of any office required to be maintained in the common of the secretary	(Name of the compainment of the	of Agent) ny for service of Ilowing the exerc	cise of reas		
8.	The secretary of state is appointed the agent of the facility	(Name of the compainment of the	of Agent) ny for service of Ilowing the exerc	cise of reas		
8. 	The secretary of state is appointed the agent of the foreign lir time there is no resident agent or if the resident agent cannot be diligence. The address of any office required to be maintained in the selimited liability company is organized is: 646 Bellevue Avenue, Newport, RI 02840 The mailing address for the limited liability company is:	(Name of the compainment of the	of Agent) ny for service of llowing the exercent stion under the I	aws of wh		
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10).	Management of the Limited Liab	pility Company (check <u>one</u> only):			
	A.		the managed X bustoness to			
		<u>or</u>				
	В.	The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)				
		<u>Manager</u>	<u>Address</u>			
	_					
11.	This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or oth authorized officer of the jurisdiction under which the foreign limited liability company was organized.					
12.	The	date this Application for Registrati	ion is to become effective, if later than the date of filing, is:			
-		(not prior to, nor more th	an 30 days after, the filing of this Application for Registration)			
			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:	Au	gust 13, 2014	Coquette Closette, LLC			
			Print Exact Name of Limited Liability Company Making Application By			
			Signature of Authorized Person			

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "COQUETTE CLOSETTE, 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 ELEVENTH DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5517152 8300

141053636

AUTHENTICATION: 1608798

DATE: 08-11-14

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

