Filing Fee: \$150.00



1. The name of the limited liability company is:

### 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

CORPORATIONS BIVE

#### **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:

	Aqualified, 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 registe	er and transact business in Rh	ode Island is:	2014 A	3300		
3.	The limited liability company is organized under the laws	s of Georgia		AUG 18	CRODANIONS		
4.	The date of its organization is 05/12/2008			70			
5.	The period of duration of the limited liability company is	(if perpetual, so state) Perpetu	ıal	PH 12: 03	AIO 9		
6.	The address of the limited liability company's resident agent in Rhode Island is:						
	450 Old Baptist Road	North Kingstown	, RI <b>02852</b>				
	(Street Address, <u>not</u> P.O. Box)	(City/Town)	(Z	(ip Code			
	and the name of the resident agent at such address is _	Eric Nordstrom (Name of A	gent)				
7.	The secretary of state is appointed the agent of the for time there is no resident agent or if the resident agent ca diligence.						
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which limited liability company is organized is:						
	Georgia, 525 Webb Industrial Drive, Marietta, GA 30062						
9.	The mailing address for the limited liability company is:						
	P.O. Box 2207, Rock Springs, WY 82902						
		FILED	···				

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10.		Management of the Limited Liability	Company (check <u>one</u> only):		
	A.	The limited liability company is to be No. 11 – DO NOT LIST ANY NAME	e managed 🗾 by its members. (If you have checked this box, go to item ES IN SECTION B.)		
	<u>or</u>				
	B.	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 an address of each manager.)			
		<u>Manager</u>	<u>Address</u>		
	<del></del>	·			
11.	This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.				
			n is to become effective, if later than the date of filing, is:		
	Upo	n Filing	30 days after, the filing of this Application for Registration)		
		(not prior to, not more than	r so days after, the filling 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	. 0	7/30/2014	Robert J. Weller, Member		
			Print Exact Name of Limited Liability Company Mobing Application		
			BySignature of Authorized Person		

# STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 08037706
DATE INC/AUTH/FILED : May 12, 2008
JURISDICTION : Georgia
PRINT DATE : July 14, 2014

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

# AQUALIFIED LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. 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.

OF G. S. O. S. O.

Brian P. Kemp Secretary of State MA AUG 18 PH 12: 03



## 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

