Filing Fee: \$150.00



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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

2015 OCT -1 AM IO: 51

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:

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The name of the limited liability company is:
<u>lean state loatings</u> L.L.
This company has been duly organized in its state of formation as a low-profit limited liability company. (Check bo

- 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 MASSAChUSELLS
4.	The date of its organization is September 9, 2015
5.	The period of duration of the limited liability company is (if perpetual, so state)
6.	The address of the limited liability company's resident agent in Rhode Island is: One Richand Square to be providence, RI 03906 (Street Address, not P.O. Bok) and the name of the resident agent at such address is Period Address (Name of Agents, The, (Name of Agents))
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.
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: 46000000000000000000000000000000000000
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9. The mailing address for the limited liability company is: <u>J5 (hurch Street, Svite 44</u> <u>Jembroke, MA</u> <u>J359</u> 10:51 Am FILED Form No. 450 Revised: 07/12 0CT 01 2015 By <u>257558</u>

- 10. Management of the Limited Liability Company (check one only):
 - A. The limited liability company is to be managed by its members. (If you have checked this box, go to item No. 11 DO <u>NOT</u> LIST ANY NAMES IN SECTION B.)

or

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 and address of each manager.)

Manager Address

- 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.
- 12. The date this Application for Registration is to become effective, if later than the date of filing, is:

(not prior to, nonmore than 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.

9/28/15 Date: _

Print Exact Name of Limited Lighting Company Applicatio fç. Signature of Authorized Person



William Francis Galvin Secretary of the Commonwealth

The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02133

September 14, 2015

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

OCEAN STATE COATINGS, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on September 9, 2015.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **MATHEW A GIOVANELLO**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: MATHEW A GIOVANELLO, PATRICK K FOLEY

The names of all persons authorized to act with respect to real property listed in the most recent filing are: MATHEW A GIOVANELLO



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Villian Tranins Galecin

Secretary of the Commonwealth

Processed By:HRM



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, 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:

Tulli U. Hole

Nellie M. Gorbea Secretary of State

