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

RECEIVED STATE SECRETARY OF STATE CORPORATIONS DIV

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:

1.	The name of the limited liability company is:				
	Ventaire, LLC				
	This company has been duly organized in its state of formation as	a low-profit limited liability company	. (Check box I	(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	Kansas			
4.	The date of its organization is 12/18/2002				
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:				
	450 Veterans Memorial Parkway, Suite 7A	East Providence	, RI	02914	
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)	
	and the name of the resident agent at such address is	C T Corporat	C T Corporation System		
		(Name of Agent)			
7.	The secretary of state is appointed the agent of the foreig time there is no resident agent or if the resident agent cann diligence.	n limited liability company foot be found or served follow	or service o	of process if at any rcise 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:				
	1019 E. North Street, P.O. Box 1050				
	Ottawa, Kansas 66067		11.5	5 Am	
9.	The mailing address for the limited liability company is:		FILE)	
	1019 E. North Street, P.O. Box 1050		NR 0-8 20	116	
	Ottawa, Kansas 66067		111 U U Z(710	
		Ву 🗢	69	5 <i>3</i>	
	m No. 450 //sed: 07/12			V.W	

10,	Management of the Limited Liability Company (check one only):			
Α.	The limited liability company is to be No. 11 – DO <u>NOT</u> LIST ANY NAMES	managed		
	<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>		
<u></u>				
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11. Th a	his 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.			
12. Th	The date this Application for Registration is to become effective, if later than the date of filing, is:			
•	(not prior to, nor more 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.		
Date:	Marke 4,20/6	Ventaire, LLC Print Exact Name of Limited Liability Company Making Application		
		By Tank & March Signature of Authorized Person		

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 3404811

Entity Name: VENTAIRE, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: PAUL MARX

Registered Office: 1019 NORTH STREET, OTTAWA, KS 66067

was filed in this office on December 18, 2002, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of March 08, 2016

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 771568 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number. 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

