

State of Rhode Island and Providence Plantations **Department of State - Business Services Division**

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793159 Anthony Refresh Group, LLC 3. State of Formation A. Brief description of the character of business conducted in Rhode Island The Supermoduler in General Conference of State of Conference of Supermoduler in General Conference of Conf	1. Entity ID Number	2. Exact nam	e of the Limited Lia	ibility Company			
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5. Principal Office Address City State Zip 812 Athens Road 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Jan Jordan Contact Title Office Manager Street Address 812 Athens Road City Crawford State GA Zip 30630 7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name Pean Jordan Manager Name Pean Jordan Street Address City State Zip City State Zip City State Zip City State Zip Check the box to indicate an attachment 8. Resident Agent in Rhode Island This Information is currently of record in the Department of State. Changes require filing Form 642. Under penelty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Name of Authorized Person	3. State of Formation	4. Brief descr	4. Brief description of the character of business conducted in Rhode Island				
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Jan Jordan 04/13/16	Name of Authorized Person	•	- •			_	
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Form No. 632 Revised: 2016