



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

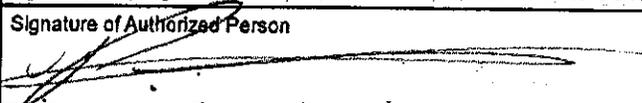
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 SECRETARY OF STATE  
 CORPORATIONS DIV.  
 2016 JUN 20 PM 12:16

**Application for Registration  
 Foreign Limited Liability Company**  
 Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, 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:		
SAFESPAN SCAFFOLDING, L.L.C.		
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
The name, if different, under which it proposes to register and transact business in Rhode Island is:		
2. The LLC is organized under the laws of:	New York State	
3. The date of its organization is:	September 19, 2002	
And the period of its duration is: CHECK ONLY ONE BOX		
<input type="checkbox"/> Perpetual (on-going)		
<input checked="" type="checkbox"/> Date certain for dissolution <u>9/30/2031</u>		
4. The name and address of the resident agent/office in Rhode Island is:		
Agent Name	Corporation Service Company	
Street Address (NOT a P.O. Box)	222 Jefferson Boulevard, Suite 200	
City/Town	State	Zip Code
Warwick	RHODE ISLAND	02888
5. The Department 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.		
6. 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:		
252 Fillmore Avenue Tonawanda, New York 14150		

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 By 277081  
 A.A. 12:16p.m.

7. The mailing address for the limited liability company is:		
252 Fillmore Avenue Tonawanda, New York 14150		
8. Management of the Limited Liability Company:		
The limited liability company is managed:		
<input type="checkbox"/> By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)		
<input checked="" type="checkbox"/> By one (1) or more managers (List managers below)		
MANAGER	ADDRESS	
Lambros Apostolopoulos	221 Bowen Road, East Aurora, NY 14052	
Paul Apostolopoulos	9050 Michael Douglas, Clarence Center, NY 14032	
David Malcolm	1421 Luther Road, East Aurora, NY 14052	
9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.		
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX		
<input checked="" type="checkbox"/> Date received (Upon filing)		
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the day of filing) _____		
<i>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.</i>		
Signature of Authorized Person	Type or Print Name of LLC	Date
	Safespan Scaffolding, L.L.C.	6-9-16

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).

**State of New York  
Department of State } ss:**

*I hereby certify, that SAFESPAN SCAFFOLDING, L.L.C. a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/19/2002, and that the Limited Liability Company is existing so far as shown by the records of the Department.*



201606100570 \* 45

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*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 09th day of June  
two thousand and sixteen.*

Anthony Giardina  
Executive Deputy Secretary of State

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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:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

