

Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2016 JUN 24 AM 10:15

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:

PATCH EQUIPMENT AND WELDING LLC

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 Vermont

4. The date of its organization is January 1, 2014

5. The period of duration of the limited liability company is (if perpetual, so state) perpetual.

6. The address of the limited liability company's resident agent in Rhode Island is:

One Richmond Square, STE 125B

Providence

, RI 02906

(Street Address, not P.O. Box)

(City/Town)

(Zip Code)

and the name of the resident agent at such address is Registered Agents Inc

(Name of Agent)

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:

1192 Battle Row Rd., Hyde Park, VT 05655

9. The mailing address for the limited liability company is:

1192 Battle Row Rd., Hyde Park, VT 05655

FILED

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BY LC 277500

10. Management of the Limited Liability Company:

- A. The limited liability company is to be managed ☒ by its members. *(If you have checked this box, go to item no. 11.)*

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.

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: 06/17/2016

PATCH EQUIPMENT AND WELDING LLC

Print Exact Name of Limited Liability Company Making Application

By Erin R. Patch 55

Signature of authorized person

STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

PATCH EQUIPMENT AND WELDING LLC

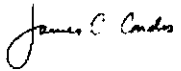
a Domestic Limited Liability Company formed under the laws of the State of VERMONT, was filed for record in this office on Jan 01, 2014.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

June 14, 2016

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital.




James C. Condos
Vermont Secretary of State

Business ID: 0283927
Certificate Number: 2013266897001