Filing Fee: \$150.00



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

R.I.DEPT.OF STATE
BUS SYCS DIV

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:

1.	The name of the limited liability company is: GINRI MARINA ASSETS, 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 Delaware			
4.	The date of its organization is11/14/2016			
5.	The period of duration of the limited liability com	ipany is (if perpetual, so state)	Perpetual	
6.	The address of the limited liability company's resident agent in Rhode Island is:			
	222 Jefferson Boulevard	Warwick	, RI <u>02888</u>	
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)	
7.	The secretary of state is appointed the agent of time there is no resident agent or if the resident diligence.	Name) of the foreign limited liability comp	e of Agent) vany for service of process if at any following the exercise 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:			
	1013 Centre Road, Suite 403-B			
	Wilmington, DE 19805			
9.	The mailing address for the limited liability comp	pany is:	FILED	
	11 East 44th Street Suite 1001		MOV 1 8 2016	
	New York, NY 10017		MOV . 2500	

Form No. 450 Revised: 12/05

10.	Management of the Limited Liability Company:		
A.	The limited liability company is to b	be managed very by its members. (If you have checked this box, go to item	
	<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>	Address	
_			
11. Th au	. 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	11/11/2016	GINRI MARINA ASSETS, LLC	
		Print Exact Name of Limited Liability Company Making Application	
		By	
		Signature of authorized person	

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GINRI MARINA ASSETS, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SIXTEENTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GINRI MARINA ASSETS, LLC" WAS FORMED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

SECTION AND ADDRESS OF THE PARTY OF THE PART

Authentication: 203348301

Date: 11-16-16

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

