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

2017 JUN -1 P 12:00 R.I. DEPARTMENT OF STATE

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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:

Copper Beech Design LLC

Is this company organized in its state or country of formation as a low-profit limited liability company? Yes ☐ No ☒

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: Florida

3. The date of its organization is: 05/09/2017

And the period of its duration is: **CHECK ONLY ONE BOX**

☒ Perpetual (on-going)

☐ Date certain for dissolution _____

4. The name and address of the resident agent/office in Rhode Island is:

Agent Name C T Corporation System

Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A

City/Town	State	Zip Code
East Providence,	RHODE ISLAND	02914

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:

539 MIDDLE ROAD GULF STREEAM, FL 33483

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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BY 304998

12:00

FORM 450 - Revised: 08/2016

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

539 MIDDLE ROAD GULF STREEAM, FL 33483

8. Management of the Limited Liability Company:

The limited liability company is managed:

☐ By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)

☒ By one (1) or more managers (List managers below)

MANAGER	ADDRESS
Ann Tighe	539 MIDDLE ROAD GULF STREEAM, FL 33483

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

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 days from the day of filing) _____

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.

Type or Print Name of LLC	Date
Copper Beech Design, LLC	5/22/2017

Signature of Authorized Person

Ann Tighe

SIGN DOCUMENT HERE

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.

State of Florida
Department of State

I certify from the records of this office that COPPER BEECH DESIGN LLC is a limited liability company organized under the laws of the State of Florida, filed on May 9, 2017.

The document number of this limited liability company is L17000102131.

I further certify that said limited liability company has paid all fees due this office through December 31, 2017 and that its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty-second day of May, 2017

Ken Detzner

Secretary of State

Tracking Number: CU1085750131

To authenticate this certificate,visit the following site,enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

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:

June 01, 2017 12:00 PM

Nellie M. Gorbea
Secretary of State