



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

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 R.I. DEPT. OF STATE  
 BUS. SVCS. DIV.  
 2017 AUG 11 PM 12:35

**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:   |                           |                       |
| <b>The Holistic Highway, LLC</b>   |                           |                       |
| Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input checked="" type="checkbox"/> No <input 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: <b>PA</b>   |                           |                       |
| 3. The date of its organization is: <b>8/1/13</b>  |                           |                       |
| And the period of its duration is: <b>CHECK ONLY ONE BOX</b>   |                           |                       |
| <input checked="" type="checkbox"/> Perpetual (on-going)   |                           |                       |
| <input type="checkbox"/> Date certain for dissolution _____  |                           |                       |
| 4. The name and address of the resident agent/office in Rhode Island is:   |                           |                       |
| Agent Name <b>Karen Tombs-Harling</b>  |                           |                       |
| Street Address (NOT a P.O. Box) <b>425 North Lane</b>  |                           |                       |
| City/Town <b>Bristol</b>   | State <b>RHODE ISLAND</b> | Zip Code <b>02809</b> |
| 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:   |                           |                       |
| <b>2827 Oakwood Drive, Harrisburg PA 17110</b>   |                           |                       |

12:35 pm  
**FILED**  
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 By 310142  
 KM

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

7. The mailing address for the limited liability company is:  
**425 North Lane, Bristol, Rhode Island, 02809**

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                           |
|---------------------|-----------------------------------|
| Karen Tombs-Harling | 425 North Lane, Bristol, RI 02809 |
|                     |                                   |
|                     |                                   |
|                     |                                   |

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<br><b>The Holistic Highway, LLC</b> | Date<br><b>8/9/17</b> |
|---|-----------------------|

Signature of Authorized Person  


COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

08/09/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

The Holistic Highway, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

*Pedro A. Contes*

Secretary of the Commonwealth

Certification Number: TSC170809211877-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>



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:

August 11, 2017 12:35 PM

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*

