



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

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS. SVCS. DIV.  
 2017 OCT 10 AM 10:33

**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:		
Design One Studio LLC		
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:		
designONE Studio llc		
2. The LLC is organized under the laws of <b>Georgia</b>		
3. The date of its organization is: <b>01/05/2011</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>Registered Agent Solutions, Inc.</b>		
Street Address (NOT a P.O. Box) <b>222 Jefferson Blvd., Suite 200</b>		
City/Town <b>Warwick</b>	State <b>RHODE ISLAND</b>	Zip Code <b>02888</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>358 Roswell Street, Suite 1250, Marietta, GA 30060</b>		

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

**FILED**  
 OCT 10 2017  
 10:33  
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7. The mailing address for the limited liability company is:

**358 Roswell Street, Suite 1250; Marietta, Georgia 30060**

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
William M. Leveille	358 Roswell Street, Suite 1250; Marietta, Georgia 30060

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

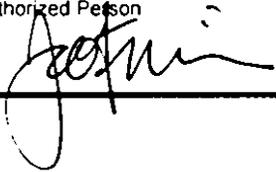
10. Date when this application for Certificate of Registration will be effective: **CHECK ONLY ONE BOX**

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 <b>designONE studio llc</b>	Date <b>10/06/2017</b>
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Signature of Authorized Person  SIGN DOCUMENT HERE



State of Rhode Island and Providence Plantations  
DEPARTMENT OF BUSINESS REGULATION  
1511 Pontiac Avenue, Bldg. 68-2  
Cranston, Rhode Island 02920

Division of  
Design  
Professionals

October 06, 2017

designONE studio llc  
Frank Trujujillo  
designone-studio.com  
358 Roswell Street, Suite 1250  
Marietta, GA 30060

**ARC.0020363-COA**

Dear Sir/Madam:

The Board of Examination and Registration of Architects (the "Board") has reviewed your application for Certificate of Authorization (COA) and has determined that you are properly registered as a Limited Liability Company. You have, therefore, been assigned the number that appears immediately after your business name on this correspondence. Your COA to practice Architecture is approved for the period **October 05, 2017 through December 31, 2018**. Attached is your certificate.

In all future instances of corresponding with this Board, please be sure to utilize this number in identifying your firm. Without this number, this Board will not be able to properly review any records or inquiries that you may have inasmuch as all registrations are done by number and not by name. If you have any questions regarding this process, please feel free to contact this Board.

Very truly yours,

**BOARD OF EXAMINATION AND  
REGISTRATION OF ARCHITECTS**

David L. DeQuattro, AIA, NCARB  
Secretary

DLD/dmb

# STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

## CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**DESIGN ONE STUDIO LLC**  
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 14925612  
Date Inc/Auth/Filed: 01/04/2011  
Jurisdiction : Georgia  
Print Date : 10/10/2017  
Form Number : 211



A handwritten signature in black ink, appearing to read "B. P. Kemp".

Brian P. Kemp  
Secretary of State



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:

October 10, 2017 10:33 AM

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*

