

## **Application for Registration**

**FOREIGN Limited Liability Company** 

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u>, 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.

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1. The name of the limited liability company is:	<del></del>	130		
The name of the limited liability company is:	<del></del>			
Masterpiece International Limited, LLC				
Is this company organized in its state or country of format	ion as a low-profit limited liabili	ity company? Yes No X		
The name, if different, under which it proposes to register an	d transact business in Rhode I	sland is:		
The LLC is organized under the laws of Delaware				
3. The date of its organization is: August 31, 2017				
And the period of its duration is: CHECK ONLY ONE BOX				
□ X Perpetual (on-going)				
Date certain for dissolution				
4. The name and address of the resident agent/office in Rho	de Island is:			
Agent Name C T Corporation System				
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A				
City/Town East Providence	State RHODE ISLAND	Zip Code 02914		
5. The Department of State is appointed the agent of the fore time there is no resident agent or if the resident agent canno diligence.	eign limited liability company for the found or served following	r service of process if at any the exercise of reasonable		
<ol><li>The address of any office required to be maintained in the liability company is organized is:</li></ol>	state or other jurisdiction under	er the laws of which the limited		
39 Broadway, 14th Floor, New York, NY 10006				

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 29 2018

7. The mailing address for the limited liability company is:				
39 Broadway, 14th Floor, New York, NY 10006				
8. Management of the Limited Liability Company:				
The limited liability company is managed:				
ਿ ੂਲੇy 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			
Daniel Para	39 Broadway, 14th Floor, New York, NY 10006			
Michael Welch	39 Broadway, 14th Floor, New York, NY 10006			
Frank Shinnick	39 Broadway, 14th Floor, New York, NY 10006			
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				
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		
Masterpiece International Limited, LLC		September 1, 2017		
Signature of Authorized Person  MENT HERE				

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

DELAWARE, DO HEREBY CERTIFY "MASTERPIECE INTERNATIONAL LIMITED,

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 TWENTY-SIXTH DAY OF JANUARY, A.D. 2018.

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

Authentication: 202044161

Date: 01-26-18