RI SOS Filing Number: 201871809550 Date: 7/6/2018 1:36:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Application for Registration FOREIGN Limited Liability Company		\$100 200 200 200 200 200 200 200 200 200
→ Filing Fee. \$150.00		RETAR RETAR RPORA
Pursuant to the provisions of RIGL <u>7-16-49</u> the undersigned for a Certificate of Registration to transact business in purpose submits the following statement:	oreign limited liability company h the state of Rhode Island, and fo	rereby or that P
The name of the limited liability company is.		<u>ن</u>
SIGCO LLC		
Is this company organized in its state or country of formati	on as a low-profit limited liability	company? Yes No No
The name, if different, under which it proposes to register and	d transact business in Rhode Isla	and is:
The LLC is organized under the laws of: Delaware		
3. The date of its organization is: 03/16/2016		
And the period of its duration is: CHECK ONLY ONE BOX		
X Perpetual (on-going)		
Date certain for dissolution	<u> </u>	
4. The name and address of the resident agent/office in Rhoo	de Island is:	
Agent Name C T Corporation System	·	
Street Address (<u>NOT</u> a P.O. Box) 450 Veterans Memorial Parky	vay, Suite 7A	
City/Town East Providence,	State RHODE ISLAND	Zip Code 02914
 The Department of State is appointed the agent of the fore time there is no resident agent or if the resident agent cannot diligence. 	eign limited liability company for s t be found or served following th	service of process if at any e exercise of reasonable
6. The address of any office required to be maintained in the liability company is organized is:	state or other jurisdiction under	the laws of which the limited

MAIL TO:

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

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

48 Spiller Dr., Westbrook, ME 04092

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BY Cu 334353

7. The mailing address for the limited liability company is:			
48 Spiller Dr., Westbrook, ME 04092			
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		
Brian Sykora	399 Boylston St., Boston, MA 02116		
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	
SIGCO LLC		07/05/2018	
Signature of Authorized Person	SIGN DOCUMENT HERE		

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

DELAWARE, DO HEREBY CERTIFY "SIGCO 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 FIFTH DAY OF JULY, A.D. 2018.

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

Authentication: 203016559

Date: 07-05-18

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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:

July 06, 2018 01:36 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

