

SECRETARY OF STATE OF

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:

The name of the limited liability company is:			
Planet Fitness Distribution 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:			
The LLC is organized under the laws of: Delaware			
3. The date of its organization is:			
06/13/2018			
And the period of its duration is: CHECK ONE BOX ONLY			
Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the resident agent/office in Rhode Island is:			
Agent Name			
COGENCY GLOBAL INC.			
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard			
City/Town	State	Zip Code	
Warwick	RHODE ISLAND	02888	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
the sale and distribution of fitness equipment and all other lawful purposes			
Check the box to indicate an attachment			

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.

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any time, there is no resident agent or if th diligence.	d the agent of the foreign limited liability company for e resident agent cannot be found or served following	ng the exercise of reasonable
7. The address of the office required to be if not so required, of the principal office of	maintained in the state or country of its organization the foreign limited liability company is:	n by the laws of that state or,
850 New I	Burton Road, Suite 201 Dover, DE 19904	ļ.
8. The mailing address for the limited liabil	ity company is:	
4 Liberty	Lane West, Floor 2 Hampton NH 03842	
9. Management of the Limited Liability Co.	mpany:	
The Limited Liability Company is to be ma	naged by: CHECK ONLY ONE BOX	
By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the char	t below.)
By one (1) or more managers (List m.	anagers below)	
MANAGER	ADDRESS	
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This application must be accompanied formation dated within 60 days of the date	by a <u>Certificate of Good Standing/Letter of Status</u> of filing.	from the state or country of
11. Date when this application for Certifica	ate of Registration will be effective: CHECK ONE B	OX ONLY
Date received (Upon filing)		
Later effective date (Date must be no	more than 30 days from the date of filing)	
Under penalty of perjury, I declare and affi accompanying attachments, and that all s	irm that I have examined this Application for Registi tatements contained herein are true and correct.	ration, including any
Type or Print Name of LLC		Date
. Planet Fitne:	ss Distribution LLC	07/18/2018
Signature of Authorized Person	A SIN DOCUMENT HERE	

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PLANET FITNESS DISTRIBUTION 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 TWENTIETH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PLANET FITNESS DISTRIBUTION LLC" WAS FORMED ON THE THIRTEENTH DAY OF JUNE, A.D. 2018.

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

Authentication: 203099943

Date: 07-20-18