

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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SECRETO SEC	VED STATE

The name of the limited liability company is:				
ninety10, 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:				
2. The LLC is organized under the laws of: Massachuse	tts			
3. The date of its organization is: 1/20/2017				
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 Rob Coulter				
Street Address (NOT a P.O. Box) 4 Calvert Street				
City/Town Newport	State RHODE ISLAND	Zip Code 02840		
5. The purpose or purposes which it proposes to pursue in th	e transaction of business in R	hode Island are:		
Software development with RI employees				
	Check the b	ox to indicate an attachment		

MAIL TO:

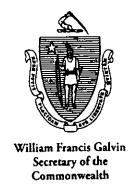
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED SEP 2.8, 2018

BY DO LITY

FORM 450 - Revised: 11/2017

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	d the agent of the foreign limited liability company for e resident agent cannot be found or served following			
7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:				
361 Newbury Street 5th Floor Boston, MA 02115				
8. The mailing address for the limited liabil	The mailing address for the limited liability company is:			
42 Ladd Street Unit 311				
East Greenwich, Rl 02818				
9. Management of the Limited Liability Cor	mpany:	• · · · ·		
The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX				
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			
Justin Sadler	10 Hoyer Court East Greenwich RI 02818			
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.				
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY				
Date received (Upon filing)				
Later effective date (Date must be no more than 30 days from the date of filing)				
	rm that I have examined this Application for Registr latements contained herein are true and correct.	ation, including any		
Type or Print Name of LLC		Date		
ninety10, LLC		9/26/2018		
Signature of Authorized Person				
SIGN DOCUMENT HERE				



The Gommonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: August 14, 2018

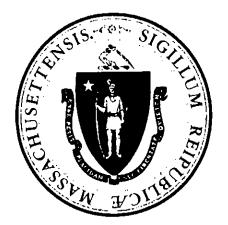
To Whom It May Concern:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

NINETY10 LLC

in accordance with the provisions of Massachusetts General Laws, Chapter 156C, on January 20, 2017.

I further certify that said Limited Liability Company has not filed a Certificate of Cancellary, Allow of that said Limited Liability Company has not been administratively dissolved; and that, so appears of record, said Limited Liability Company has legal existence.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

William Tranin Galetin

Certificate Number: 18080267350

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: