



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division****Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

RECEIVED  
STATE  
R.I. DEPT. OF STATE  
BUS. SERVICES DIV.  
DEC 19 AM 10:26

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:

**NOVO ENERGY SERVICES 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: **DELAWARE**3. The date of its organization is: **07/27/2018**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 **LEGALINC CORPORATE SERVICES INC.**Street Address (NOT a P.O. Box) **222 JEFFERSON BLVD. , SUITE 200**City/Town **WARWICK**State **RHODE ISLAND**Zip Code **02888**

5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

**RETAIL ELECTRICITY BROKER**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](http://www.sos.ri.gov)

FILED  
STAMP  
DEC 19 2018  
BY *[Signature]* RBPWT  
10.26

6. The RI 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.

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:

**156 5TH AVE SUITE 1218, NEW YORK, NY 10010**

8. The mailing address for the limited liability company is:

**156 5TH AVE SUITE 1218, NEW YORK, NY 10010**

9. Management of the Limited Liability Company:

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                                           |
|------------------------|---------------------------------------------------|
| <b>BRADLEY QUESTER</b> | <b>156 5TH AVE SUITE 1218, NEW YORK, NY 10010</b> |
|                        |                                                   |
|                        |                                                   |
|                        |                                                   |

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status 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**

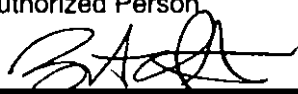
☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 days from the date of filing) \_\_\_\_\_

*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<br><b>NOVO ENERGY SERVICES LLC</b> | Date<br><b>12/13/18</b> |
|--------------------------------------------------------------|-------------------------|

Signature of Authorized Person



SIGN DOCUMENT HERE

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT  
COPY OF THE CERTIFICATE OF FORMATION OF "NOVO ENERGY SERVICES  
LLC", FILED IN THIS OFFICE ON THE TWENTY-SEVENTH DAY OF JULY,  
A.D. 2018, AT 11:40 O'CLOCK A.M.

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BUS SVCS DIV  
23:0 DEC 19 AM 10:26



  
Jeffrey W. Bullock, Secretary of State

6992288 8100  
SR# 20185877967

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203144019  
Date: 07-27-18



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:

December 19, 2018 10:26 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

