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 nose submits the following statement:

purpose submits the following statement.		<del></del>	
The name of the limited liability company is:	<u> </u>	– m	
LOPS BREWING LLC			
Is this company organized in its state or country of formation a	as a low-profit limited liability co	mpany? 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: MASSACHUS	ETTS		
3. The date of its organization is: 03/14/2018			
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 SEAN DANIEL LOPOLITO			
Street Address (NOT a P.O. Box) 122 NORTH MAIN STREET, UNIT #1			
City/Town WOONSOCKET	State RHODE ISLAND	Zip Code RI 02895	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: THE PURPOSE OF LOPS BREWING LLC'S BUSINESS IS THE FOLLOWING: - CONSTRUCT AND OPERATE A BREWERY WHERE BEER WILL BE BREWED AND SOLD ON PREMISES IN ACCORDANCE WITH CITY OF WOONSOCKET AND STATE OF RHODE ISLAND REGULATIONS - SELL LOPS BREWING MERCHANDISE - SELL PACKAGED SNACKS AND NON-ALCOHOLIC DRINKS (IN ADDITION TO BREWED ON PREMISE BEER)			
Check the box to indicate an attachment			

MAIL TO:

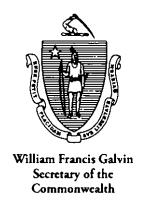
**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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

JAN 03 2019

AAA 13:01 pm.

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 dilligence.			
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:			
122 NORTH MAIN STREET UNIT #1, WO			
8. The mailing address for the limited liabil 71 BROAD STREET PLAINVILLE, MA 02762	ity company is:		
9. Management of the Limited Liability Co.	mpany:		
The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX			
y 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		
SEAN DANIER LOPOLITY	71 BROAD STREET, PLAINVILLE, MA 02762		
SARAH LEPOLITO	71 BROAD STREET, PLANVILLE, MA 02762		
ANDREA ROBERTO	136 GORE STREET, CAMBRIDG	E MA 02114	
		•	
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)			
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	
LOPS BREWING LLC		1/2/2019	
Signature of Authorized Person	1/2/2019 PN TRE		



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

## **December 27, 2018**

## TO WHOM IT MAY CONCERN:

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

## LOPS BREWING LLC

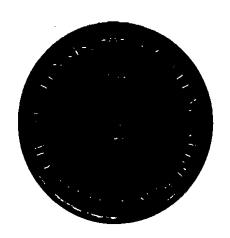
in accordance with the provisions of Massachusetts General Laws Chapter 156C on March 14, 2018.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **SEAN DANIEL LOPOLITO**, **ANDREA L. ROBERTO**, **SARAH A LOPOLITO** 

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: SEAN DANIEL LOPOLITO, ANDREA L. ROBERTO, SARAH A LOPOLITO

The names of all persons authorized to act with respect to real property listed in the most recent filing are: SEAN DANIEL LOPOLITO



In testimony of which,
I have hereunto affixed the
Great Scal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth