Application for Registration **FOREIGN Limited Liability Company** → Filing Fee: \$150.00 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: **UWorld 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: Texas 3. The date of its organization is: 07/27/2010 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 **C T Corporation System** Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A Zip Code 02914 City/Town State **East Providence RHODE ISLAND** 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Sell online subscriptions to question banks for test preparation 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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FORM 450 - Revised: 01/2019

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:		
9111 Cypress Waters Blvd, Suite 300, Coppell, TX 75019		
8. The mailing address for the limited liability company is:		
9111 Cypress Waters Blvd, Suite 300, Coppell, TX 75019		
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	
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 90 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
UWorld, LLC		2/28/2019
Signature of Authorized Person SIGNOCUMENT HERE		



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for UWORLD, LLC (file number 801298450), a Domestic Limited Liability Company (LLC), was filed in this office on July 27, 2010

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate NATIONAL REGISTERED AGENTS, INC as the designated registered agent for the above named entity and the designated registered office for said entity is as follows.

1999 BRYAN ST., STE. 900

DALLAS, TX - 75201 3136 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seasof State at my office in Austin, Texas on February 27, 201

RECEIVED
ECRETARY OF STATE
CORPORATIONS DIV



David Whitley Secretary of State