

State of Rhode Island and Providence Plantations **Department of State - Business Services Division** 

## **Application for Registration**

FOREIGN Limited Liability Company

 $\rightarrow$  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:

## Discount Tire Certificate LLC

Is this company organized in its state or country of formation as a low-profit limited liability company? Yes

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: Arizona

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 **CT** Corporation System

Street Address (NOT a P.O. Box) 480 Veterans Memroial Highway, Suite 7A

City/Town	State	Zip Code
East Providence	RHODE ISLAND	02914

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

Check the box to indicate an attachment

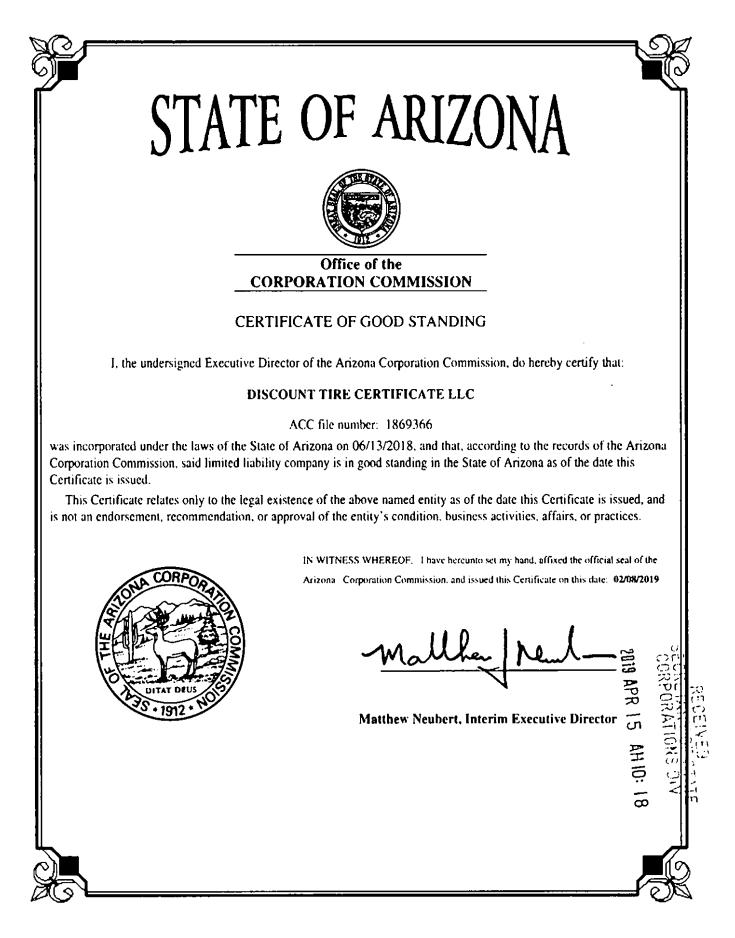
MAIL TO: **Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 450 - Revised. 01/2019

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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:				
20225 N. Scottsdale Road, Scottsdale, AZ 85255				
8. The mailing address for the limited liabi 20225 N. Scottsdale Road, Scottsdale, AZ				
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			
Christian Roe	20225 N. Scottsdale Road, Scottsdale, AZ 85255			
Dean Muglia	20225 N. Scottsdale Road, Scottsdale, AZ 85255			
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		
Discount Tire Certificate LLC		03/04/2019		
Signature of Authorized Person SIGN DOCUMENT HERE				





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:

April 15, 2019 10:18 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

