RI SOS Filing Number: 202033526010 Date: 1/31/2020 2:37:00 AM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

## **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:

purpose submits the following statement:			
The name of the limited liability company is:			
Garwood Medical Devices, 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:			
The LLC is organized under the laws of:     New York		€ <u>€</u> CC 202	
3. The date of its organization is: 7/15/2014		URPER STA	
And the period of its duration is: CHECK ONE BOX ONLY		ယ် <u>ကို</u> ကိုင်	
Perpetual (on-going)		# 20% - 건소(2)	
Date certain for dissolution		7.50 7.55 7.75 5 PM 2	
4. The name and address of the resident agent/office in Rhod	e Island is:	ယ္ <္ပ်	
Agent Name Jason Maranhao		•	
Street Address (NOT a P.O. Box) 144 North Street			
City/Town Warwick	State RHODE ISLAND	Zip Code 02886-1238	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
We have an employee that lives and works in Rhode Island that works from home. WE ARE A MEDICAL			
DEVICE COMPANY, MARINE DEVICE FOR BUR			
DEVICE COMPANY, MAKING DEVICES FOR HEALTHEARE. OUR GAPLOKEE WRITES FIRMWARE + SOFTWARE FOR BUR			
Devices.			
Check the box to indicate an attachment			
<del></del>			

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 2:37 FILED.

JAN 3 1 2020

BY A B Ø8QQK

FORM 450 - Revised: 11/2019

	d the agent of the foreign limited liability company for e resident agent cannot be found or served following	•	
if not so required, of the principal office of	501TE 450	n by the laws of that state or,	
BURFALD, NY	14203		
8. The mailing address for the limited liabil 77 Goodell Street, Suite 450, Buffalo, NY 1420	• •		
9. Management of the Limited Liability Con	mpany:		
The Limited Liability Company is to be ma	naged by: CHECK ONLY ONE BOX		
By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the char	t below.)	
By one (1) or more managers (List ma	anagers below)		
MANAGER	ADDRESS		
Wayne D Bacon	77 Goodell Street, Buffalo, NY 14203		
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 Certifica	ite of Registration will be effective: CHECK ONE Bo	OX ONLY	
Date received (Upon filing)			
Later effective date (Date must be no	more than 90 days from the date of filing)		
	rm that I have examined this Application for Registr tatements contained herein are true and correct.	ation, including any	
Type or Print Name of LLC		Date	
Garwood Medical Devices, LLC		1/8/2020	
Signature of Authorized Person	Pres.		

## State of New York Department of State } ss

I hereby certify, that ENERMED, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/15/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Certificate of Publication of ENERMED, LLC was filed on 10/29/2014.

A certificate changing name to GARWOOD MEDICAL DEVICES, LLC was filed on 12/36/2015.

A Biennial Statement was filed 01/09/2020.

I further certify, that no other documents have been filed by such Limited Liability Company.

OF NEW

Witness my hand and the official seal of the Department of State at the City of Albany, this 09th day of January two thousand and twenty.

Braden C Hylan

Brendan C. Hughes Executive Deputy Secretary of State

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R.I. DEPT. OF STATE BUS SVCS DIV



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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:

January 31, 2020 02:37 AM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

