RI SOS Filing Number: 202034918760 Date: 2/21/2020 12:43:00 PM

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:

| 2020 FEB 21 | SECRETARY CORPORAT |
|-------------|-----------------------|
| PH 12: 43 | EIVED ATIONS DIV |
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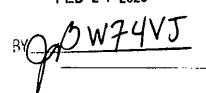
| arped decime the following statement. | | \alpha \sigma \ |
|---|---------------------------------------|--|
| The name of the limited liability company is: | | |
| AUTOIPACKET, LLC | | |
| Is this company organized in its state or country of formation | as a low-profit limited liability | company? 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: 7/2/2012 | | |
| 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 Rhoo | de Island is: | |
| Northwest Registered Age | nt, LLC | |
| Street Address (NOT a P.O. Box) One Richmond | Square STE 12 | 5B |
| Providence | State RHODE ISLAND | Zip Code 02906 |
| 5. The purpose or purposes which it proposes to pursue in th | e transaction of business in F | Rhode Island are: |
| Sale online computer software | | |
| | | |
| | | |
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| | Ob 4 44 44 - 4 | havita indianta |
| | Check the t | 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 12:43
FEB 2 1 2020



FORM 450 - Revised 01/2019

| The RI Department of State is appointed any time, there is no resident agent or if the diligence. | d the agent of the foreign limited liability company for e resident agent cannot be found or served following | or service of process if, at ng the exercise of reasonable | | |
|--|--|---|--|--|
| 7. The address of the office required to be if not so required, of the principal office of | maintained in the state or country of its organization the foreign limited liability company is: | on by the laws of that state or, | | |
| One Richmond Square STE 125B, | Providence RI 02906 | | | |
| 8. The mailing address for the limited liabil | ity company is: | · · · · · · · · · · · · · · · · · · · | | |
| One Richmond Square STE 1 | 25B Providence RI 02906 | | | |
| 9. Management of the Limited Liability Cor | npany: | | | |
| 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 managers below) | | | | |
| MANAGER | ADDRESS | | | |
| | | | | |
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| | | | | |
| 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 Certifica | te 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) | | | |
| Under penalty of perjury, I declare and affi accompanying attachments, and that all st | rm that I have examined this Application for Registi atements contained herein are true and correct. | ration, including any | | |
| Type or Print Name of LLC | | Date | | |
| AutoiPacket, LLC | | 02/14/2020 | | |
| Signature of Authorized Person | | | | |
| Morgan Polker | SIGN DOCUMENT HERE | | | |

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AUTOIPACKET, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE FOURTEENTH DAY OF FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AUTOIPACKET, LLC" WAS FORMED ON THE SECOND DAY OF JULY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

SECRETARY OF STATE CORPORATIONS DIV



5178343 8300

SR# 20201114567

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Buffoch, Secretary of State

Authentication: 202387661

Date: 02-14-20

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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:

February 21, 2020 12:43 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

