



State of Rhode Island

Department of State - Business Services Division

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:

2021 FEB - 2 P 12:29
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 R.I. DEPT OF STATE
 BUS SVCS DIV
 STATE

1. The name of the limited liability company is:

Coding Clarified 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: Idaho

3. The date of its organization is: 10/08/2018

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 Registered Agents Inc.

Street Address (NOT a P.O. Box) 47 Wood Ave Suite 2

City/Town Barrington

State RHODE ISLAND

Zip Code 02806

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

To join the Rhode Island Workforce as a training provider

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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BY: KMI/QD

12:29

FORM 450 - Revised 08/2020

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:

2271 E Sundown Drive Coeur D' Alene Idaho 83815-7025

8. The mailing address for the limited liability company is:

2271 E Sundown Drive Coeur D' Alene Idaho 83815-7025

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
Janine M. Mothershed	2271 E Sundown Drive Coeur D' Alene Idaho 83815-7025

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 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 Coding Clarified LLC	Date 1/30/2021
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Signature of Authorized Person

Janine Mothershed



STATE OF IDAHO

Lawrence Denney | Secretary of State
Business Office
450 North 4th Street
PO Box 83720
Boise, ID 83720

December 31, 2020

Request Type: Certificate of Existence/Filing

Request #: 0004111545

Receipt #: 000426021

Issuance Date: 12/31/2020

Copies Requested: 0

Regarding: Coding Clarified LLC

Filing Type: Limited Liability Company (D)

Formation/Qualification Date: 10/08/2018

Status: Active-Existing

Duration Term: Perpetual

File #: 3306506

Formation Locale: IDAHO

Inactive Date:

Certificate of Existence

I, Lawrence Denney, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

Coding Clarified LLC

is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above.

A handwritten signature in black ink, appearing to read "Lawrence Denney".

Lawrence Denney

Idaho Secretary of State

Processed By: Business Division

Verification #: 010514012



State of Rhode Island

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,
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 02, 2021 12:29 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

