



# REINSTATEMENT REQUIREMENTS

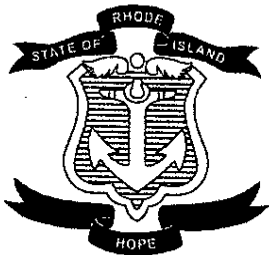
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R.I. DEPT. OF STATE  
BUS SVCS DIV  
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------------------------------|------------------------------|----------------------|-----------------------------------------------------------------|------------------------|---------------------|----------------------------------------------------|--|--|--------------------------------------------------------------|--|--|------------------------------------------------------|--|--|---------------------------------------------------------------|--|--|--------------------------------------------------------------------|--|--|----------------------------------------------------|--|--|-----------------------------------------------------------|--|--|
| 1. Entity ID Number:<br><br>001686648                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2. The name of the entity is:<br><br>The Pot People LLC |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 3. Date of Revocation:<br><br>12-29-2020                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 4. Reason for Revocation:<br><br>Annual Report          |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 5. Entity Type:<br><br>Limited Liability Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 6. The reinstatement requirements are:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <table><tr><td><input checked="" type="checkbox"/> Annual Reports (# of reports) 2</td><td>(report filing fee) \$ 50.00</td><td>Total Fees \$ 100.00</td></tr><tr><td><input checked="" type="checkbox"/> Penalty fees (# of years) 1</td><td>(penalty fee) \$ 50.00</td><td>Total Fees \$ 50.00</td></tr><tr><td><input type="checkbox"/> Replacement filing fee \$</td><td></td><td></td></tr><tr><td><input checked="" type="checkbox"/> LOGS (Tax Good Standing)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Legislative Act/Court Order</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Change of Agent Form (filing fee) \$</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Change of Registered Office Form - NO FEE</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Certificate of Correction</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Amendment (name change required)</td><td></td><td></td></tr></table> |                                                         | <input checked="" type="checkbox"/> Annual Reports (# of reports) 2 | (report filing fee) \$ 50.00 | Total Fees \$ 100.00 | <input checked="" type="checkbox"/> Penalty fees (# of years) 1 | (penalty fee) \$ 50.00 | Total Fees \$ 50.00 | <input type="checkbox"/> Replacement filing fee \$ |  |  | <input checked="" type="checkbox"/> LOGS (Tax Good Standing) |  |  | <input type="checkbox"/> Legislative Act/Court Order |  |  | <input type="checkbox"/> Change of Agent Form (filing fee) \$ |  |  | <input type="checkbox"/> Change of Registered Office Form - NO FEE |  |  | <input type="checkbox"/> Certificate of Correction |  |  | <input type="checkbox"/> Amendment (name change required) |  |  |
| <input checked="" type="checkbox"/> Annual Reports (# of reports) 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (report filing fee) \$ 50.00                            | Total Fees \$ 100.00                                                |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input checked="" type="checkbox"/> Penalty fees (# of years) 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (penalty fee) \$ 50.00                                  | Total Fees \$ 50.00                                                 |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Replacement filing fee \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input checked="" type="checkbox"/> LOGS (Tax Good Standing)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Legislative Act/Court Order                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Change of Agent Form (filing fee) \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Change of Registered Office Form - NO FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Certificate of Correction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Amendment (name change required)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |
| 7. The total fee due to RI Department of State: \$ 150.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                         |                                                                     |                              |                      |                                                                 |                        |                     |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                    |  |  |                                                    |  |  |                                                           |  |  |

**FILED**

MAR 09 2021

BY THKCS



STATE OF RHODE ISLAND  
DEPARTMENT OF ADMINISTRATION  
DIVISION OF TAXATION  
ONE CAPITOL HILL  
PROVIDENCE, RI 02908

THE POT PEOPLE LLC  
ATTN: ANDREW TOLLEY  
PO BOX 243  
WARREN, RI 02885-0243

## LETTER OF GOOD STANDING

It appears from our records that **The Pot People LLC** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **The Pot People LLC** is in good standing with the Rhode Island Division of Taxation as of **01/18/2021**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above-named corporation for the purpose of:

## DISSOLUTION

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

IAN BEAUREGARD  
Supervising Revenue Officer

Neena Savage  
Tax Administrator

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DLN: 10009633172