

Application for RegistrationFOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned tapplies for a Certificate of Registration to transact business in purpose submits the following statement:	oreign limited liability company the State of Rhode Island, and	hereby for that
The name of the limited liability company is:		
Hay Creek Management Company LLC		
Is this company organized in its state or country of formation	as a low-profit limited liability of	ompany? Yes No
The name, if different, under which it proposes to register and	d transact business in Rhode Is	land is:
2. The LLC is organized under the laws of: New Hampshir	e	
The date of its organization is: March 9, 2006		
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 Rhod	e Island is:	
Agent Name Registered Agent Solutions, Inc.		
Street Address (NOT a P.O. Box) 222 Jefferson Blvd., Suite 200		
City/Town Warwick	State RHODE ISLAND	Zip Code 02888
The purpose or purposes which it proposes to pursue in the Hotel, accommodation, and food service management.	transaction of business in Rho	ode Island are:
when the service management.		
	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.n.gov FILED

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6. The PI December 4 of Classic		
any time, there is no resident agent or if t diligence.	ed the agent of the foreign limited liability company the resident agent cannot be found or served follow	for service of process if, at wing the exercise of reasonable
The address of the office required to be if not so required, of the principal office of	e maintained in the state or country of its organiza	tion by the laws of that state or,
2 Pine Street, Exeter, NH 03833	o assumption (a.	
9. The mailing add		
The mailing address for the limited liab Pinc Street	ility company is:	
Excler, NH 03833		
Lacter, Nri 03833		
9. Management of the Limited Liability Co	mpany:	
The Limited Liability Company is to be ma	anaged by: CHECK ONLY ONE ROX	·
	this box, go to Section 9. (DO NOT fill out the cha	- 4 1 1 1
l 		art below.)
✓ By one (1) or more managers (List m	anagers below)	
MANAGER	ADDRESS	
Norman MacLeod	2 Pine Street, Exeter, NH 03833	
		<u> </u>
		1
This application must be accompanied formation dated within 60 days of the date	by a <u>Certificate of Good Standing/Letter of Status</u> of filing.	from the state or country of
	te of Registration will be effective: CHECK ONE B	OV ONLY
✓ Date received (Upon filing)	STATE OF CHESTIVE OF CHEST	OX UNLY
	more than 90 days from the date of filing)	
Under penalty of perjury, I declare and affir accompanying attachments, and that all st	m that I have examined this Application for Regist atements contained herein are true and correct.	ration, including any
Type or Print Name of LLC		Date
Hay Creek Management Company LLC		02/25/2021
Signature of Authorized Person		<u> </u>
Mark De San		
1		

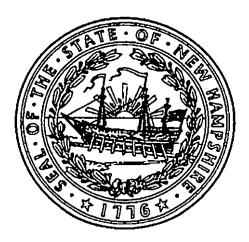
State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner. Secretary of State of the State of New Hampshire, do hereby certify that HAY CREEK MANAGEMENT COMPANY, LLC is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on March 09, 2006. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 553582

Certificate Number: 0005269393



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 25th day of February A.D. 2021.

William M. Gardner

Sccretary of State