RI SOS Filing Number: 202194655260 Date: 3/17/2021 12:10:00 PM



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## **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:

purpose submits the following statement:	2011000 III IIIO OMIG OI I VIIOGO ISIGNO, MI		
The name of the limited liability company is:			
Black Dog Renovations 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 n	egister and transact business in Rhode	Island is:	
The LLC is organized under the laws of:     Mas	sachusetts		
3. The date of its organization is: 02/25/2020	***		
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/offi	ce 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 pro-	ursue in the transaction of business in R	thode Island are:	
Home improvement Contractor			
	-	<i>.</i>	
	Check the I	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

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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:			
61 Thayer Farms Road Attleboro MA 02703			
8. The mailing address for the limited liability company is: 61 Thayer Farms Road Attleboro MA 02703			
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		
David Wood	61 Thayer Farms Road Attleboro MA 02703		
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 Certificate of Registration will be effective: CHECK ONE BOX ONLY			
② 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		Date	
Black Dog Renovations LLC		02/04/2021 3/17/2021	
Signature of Authorized Person			



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

### February 19, 2021

### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### **BLACK DOG RENOVATIONS LLC**

in accordance with the provisions of Massachusetts General Laws Chapter 156C on February 25, 2020.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **DAVID** H. WOOD

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **DAVID H. WOOD** 

The names of all persons authorized to act with respect to real property listed in the most recent filing are: DAVID H. WOOD

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Ellean Travino Galicin

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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:

March 17, 2021 12:10 PM

Nellie M. Gorbea Secretary of State

Tulli U. Horler

