



State of Rhode Island  
Department of State - Business Services Division

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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:

1. The name of the limited liability company is:		
Genuine Food Lab, LLC		
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
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: 06/04/2013		
And the period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
4. The name and address of the resident agent/office in Rhode Island is:		
Agent Name Northwest Registered Agent, LLC		
Street Address (NOT a P.O. Box) 47 Wood Ave, Suite 2		
City/Town Barrington	State RHODE ISLAND	Zip Code 02808
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
Genuine Foods delivers high quality, fresh, culturally relevant food service programs to K-12 schools, higher education, seniors and communities across the country. With an emphasis on fresh ingredients, regional supplier relationships and meals that celebrate local cultures and communities, Genuine Foods aims to improve the lives and livelihoods of people and communities so that their most vulnerable members can flourish. More information at <a href="http://www.genuinefoods.com">www.genuinefoods.com</a> .		
Check the box to indicate an attachment <input type="checkbox"/>		

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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BY *Ch K6T5J*  
3:00

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:  228 Park Ave S, #69981 New York, NY 10003	
8. The mailing address for the limited liability company is:  PO Box 96503, #69981, Washington, DC, 20090	
9. Management of the Limited Liability Company:  The Limited Liability Company is to be managed by: <b>CHECK ONLY ONE BOX</b> <input type="checkbox"/> By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.) <input checked="" type="checkbox"/> By one (1) or more managers (List managers below)	
<b>MANAGER</b>	<b>ADDRESS</b>
Jeff Mills, Owner & CEO	386 Pemsong Lane, Yarmouth, ME 04096
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: <b>CHECK ONE BOX ONLY</b> <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____	
<i>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.</i>	
Type or Print Name of LLC Genuine Food Lab, LLC	Date 3/15/21
Signature of Authorized Person 	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).

FORM 450 - Revised: 08/2020

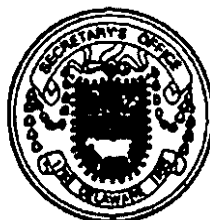
# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENUINE FOOD LAB, 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 TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENUINE FOOD LAB, LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2013.



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SR# 20210536847

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202583845

Date: 02-24-21