

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

Pursuant to the provisions of RIGL <u>7-16-49,</u> the undersigned for applies for a Certificate of Registration to transact business in topurpose submits the following statement:	preign limited liability company higher state of Rhode Island, and f	or that	
The name of the limited liability company is:			
Miami Wiipica LLC			
Is this company organized in its state or country of formation	on as a low-profit limited liability	company? Yes No	
The name, if different, under which it proposes to register and	transact business in Rhode Isl	and is:	
2. The LLC is organized under the laws of: Virginia			
3. The date of its organization is: 1/23/2019			
And the period of its duration is: CHECK ONLY ONE BOX			
Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the resident agent/office in Rhod	e Island is:		
Agent Name Paracorp Incorporated			
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200			
City/Town Warwick	State RHODE ISLAND	Zip Code 02888	
The Department of State is appointed the agent of the foreitime there is no resident agent or if the resident agent cannot diligence.			
The address of any office required to be maintained in the liability company is organized is:	state or other jurisdiction under	the laws of which the limited	
1950 Roland Clarke Place, Suite 210E, Reston, Virginia 20)191		

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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FORM 450 - Revised: 08/2016

7. The mailing address for the limited liability company is:			
1950 Roland Clarke Place, Suite 210E, Reston, Virginia 20191			
8. Management of the Limited Liability Co	трапу:		
The limited liability company is managed:			
☑ By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the chair	t below.)	
By one (1) or more managers (List managers below)			
MANAGER	ADDRESS		
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9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.			
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX			
✓ Date received (Upon filing)			
Later effective date (Date must be no more than 30 days from the day of filing)			
Under penally 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	
Miami Wiipica LLC		3/31/2021	
Signature of Authorized Person Daniela David	SIGN DOCUMENT HERE	1	

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That Miami Wiipica, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the limited liability company was formed on January 23, 2019; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

ORATION COMMISSION

Signed and Sealed at Richmond on this Date:

April 1, 2021

Bernard J. Logan, Clerk of the Commission