



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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R.I. DEPT. OF STATE
BUS SVCS DIV
2021 MAY - 3 A 10:48

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:		
Advowaste Medical Services Limited Liability Company		
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 register and transact business in Rhode Island is:		
2. The LLC is organized under the laws of: New Jersey		
3. The date of its organization is: 11/04/2014		
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 Rhode Island is:		
Agent Name Northwest Registered Agent, LLC		
Street Address (NOT a P.O. Box) 47 Wood Ave Suite 2		
City/Town	State	Zip Code
Barrington	RHODE ISLAND	02806
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
Any business purpose		
medical waste transport and disposal company service.		
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.ri.gov

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BY MM265

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FORM 450 - Revised 01/2019

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:

Advowaste Medical 16 S. Clifton Ave Suite 201 Shelton CT 06470

8. The mailing address for the limited liability company is:

5000 Thayer Center STE C Oakland MD 21550

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

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status 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**

☒ 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

Advowaste Medical Services Limited Liability Company

Date

01-30-2024

Signature of Authorized Person

J. Reich

NEW JERSEY DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES

CERTIFICATE OF FORMATION

ADVOWASTE MEDICAL SERVICES LIMITED LIABILITY COMPANY

0400699832

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey state law on 11/04/2014 and was assigned identification number 0400699832. Following are the articles that constitute its original certificate.

1. Name:

ADVOWASTE MEDICAL SERVICES LIMITED LIABILITY COMPANY

2. Registered Agent:

JOSEPH REICH

3. Registered Office:

92 ASPEN COURT
LAKEWOOD, NJ 08701

4. Business Purpose:

Medical Waste Transport

5. Members/Managers:

JOSEPH REICH
92 ASPEN COURT
LAKEWOOD, NJ 08701

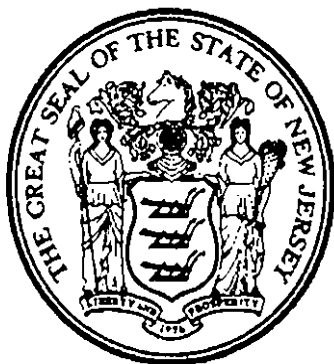
ERIC NEUMAN
105 STRATFORD PLACE
LAKEWOOD, NJ 08701

6. Main Business Address:

92 ASPEN COURT
LAKEWOOD, NJ 08701

Signatures:

JOSEPH REICH
AUTHORIZED REPRESENTATIVE



Certification# 134078586

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
4th day of November, 2014

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

Andrew P Sidamon-Eristoff
State Treasurer



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

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:

May 03, 2021 10:48 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

