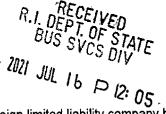


Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00



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FOR SEGREYARY OF STATE USE CHEV

Pursuant to the provisions of RIGL <u>7-16-49</u>, 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:

ourpose submits the following statement.		
The name of the limited liability company is:		
DSD Partners, LLC	1	
Is this company organized in its state or country of formation a		
The name, if different, under which it proposes to register and	transact business in Rhode Isla	and is:
2. The LLC is organized under the laws of: Delaware		
3. The date of its organization is: 04/49/2021		
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	e 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 ₀₂₈₀₆
5. The purpose or purposes which it proposes to pursue in the	transaction of business in Rho	ode Island are:
Support for direct store delivery of non-warehoused retail goods and		
Island and Virginia.		
	Check the box	x 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 FILED

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FORM 450 - Revised: 08/2020

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6. The RI Department of State is appointed any time, there is no resident agent or if the diligence.	d the agent of the foreign limited liability company for service of process if, at e resident agent cannot be found or served following the exercise of reasonable	
7. The address of the office required to be if not so required, of the principal office office of the principal office office of the principal office	maintained in the state or country of its organization by the laws of that state or, the foreign limited liability company is:	
10800 Midlothian Tnpk, Suite 300, Richmond,	VA 23235	
8. The mailing address for the limited liabil	lity company is:	
10800 Midlothian Tnpk, Suite 300, Richmond,	VA 23235	
9. Management of the Limited Liability Cor	mpany:	
The Limited Liability Company is to be ma		
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)	anagers below)	
MANAGER	ADDRESS	
Jason Garrett, COO	10800 Midlothian Tnpk, Suite 300, Richmond, VA 23235	
Mark Devooght, CEO	10800 Midlothian Tnpk, Suite 300, Richmond, VA 23235	
10. This application must be accompanied formation dated within 60 days of the date	d by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of e of filing.	
	ate 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 aff accompanying attachments, and that all s	firm that I have examined this Application for Registration, including any statements contained herein are true and correct.	
Type or Print Name of LLC	Date	
DSD Partners, LL	-C 7-8-202)	
Signature of Authorized Person		
Home Smelt		

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DSD PARTNERS, 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 SIXTEENTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DSD PARTNERS, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203466476

Date: 06-16-21

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SR# 20212472958