RI SOS Filing Number: 202101296490 Date: 9/13/2021 9:54:00 AM



Application for Registration FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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

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 Recipient purpose submits the following statement:

The name of the limited liability company is:	···		
Monetaria LLC			
Is this company organized in its state or country of formation a	as a low-profit limited liability o	ompany? Yes No 🗹	
The name, if different, under which it proposes to register and	transact business in Rhode Is	sland is:	
2. The LLC is organized under the laws of: New York			
3. The date of its organization is: 7/16/2020			
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/office in Rhode Island is:			
Agent Name Corporation Service Company			
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200			
City/Town Warwick	State RHODE ISLAND	Zip Code 02888	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
collection agency			
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



	d the agent of the foreign limited liability company for e resident agent cannot be found or served following		
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:			
111 John St, Suite 1210 New York,	NY 10038		
8. The mailing address for the limited liabil			
111 John St, Suite 1210 New York,	NY 10038		
9. Management of the Limited Liability Co.	mpany:		
The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX			
■ By its members (If you have checked this box, 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 <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			
Date received (Upon filing)			
Later effective date (Date must be no more than 90 days from the date of filing)			
	rm that I have examined this Application for Registi tatements contained herein are true and correct.	ration, including any	
Type or Print Name of LLC		Date	
Monetaria LLC		09/02/2021	
Signature of Authorized Person			

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:

MONETARIA LLC

DOS ID Number:

5789894

Entity Type:

DOMESTIC LIMITED LIABILITY COMPANY

Entity Status:

EXISTING

Date of Initial Filing with DOS:

07/16/2020

Statement Status:

CURRENT

Statement Due Date:

07/31/2022

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on September 07, 2021 at 04:31 P.M.

Brandon C Hugher

ROSSANA ROSADO, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

Authentication Number: 100000327189 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov

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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:

September 13, 2021 09:54 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

