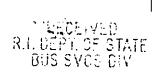


### Department of State - Business Services Division

## Application for Registration

**FOREIGN Limited Liability Company** 

→ Filing Fee: \$150.00



2021 OCT 13 PH 2: 29

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:

purpose submits the rollowing statement:		
The name of the limited liability company is:		
Tarantino Losistics LLC		
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:	ambhire	
3. The date of its organization is: 06/07/21		
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 Johanhert A. Santana Rosario		
Street Address (NOT a P.O. Box)		
21 moorefield St.		
City/Town Providence	State RHODE ISLAND	Zip Code
5. The purpose or purposes which it proposes to pursue in the	transaction of business in Rh	
Transportation.		
	Check the bo	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 AA OCT 13 2021 2:29 PM.

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.		
170 Commerc	e way Suite 200 Portsmouth NH 03801	
8. The mailing address for the limited liabil	lity company is:	
	Way Suite 200 Portsmouth NH 03801	
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, 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 Certifica	ite 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)		
	irm that I have examined this Application for Registration, including any tatements contained herein are true and correct.	
Type or Print Name of LLC Date		
Tarantino Cosistics LLC 10/13/21		
Signature of Authorized Person		
— <del>—</del>		

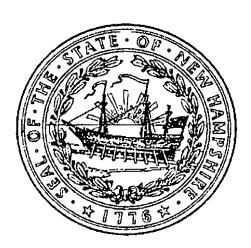
# State of New Hampshire Department of State

### **CERTIFICATE**

I. William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that TARANTINO LOGISTICS LLC is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on June 07, 2021. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 872534

Certificate Number: 0005454914



#### IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire. this 13th day of October A.D. 2021.

William M. Gardner Secretary of State