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State of Rhode Island  
**Department of State - Business Services Division**

**Application for Certificate of Conversion**

DOMESTIC Business Corporation, Non-Profit Corporation,  
Limited Partnership, Limited Liability Partnership or Limited  
Liability Company

→ No Filing Fee

**STAMP**

FOR  
STATE  
USE ONLY

Pursuant to the applicable provisions of RIGL 7-1,2-1007, 7-6-48.1, 7-13-8.1 and 7-16-5.1, the undersigned submits the following Certificate of Conversion:

1. Entity ID Number: 001622424		2. The full name of the converting entity is: Food Coma Inc.	
3. It is formed under the jurisdiction of: Massachusetts		4. The date of formation is: 2/20/2004	
5. The jurisdiction to which the entity is converting: <b>RHODE ISLAND</b>			
6. The structure of the converting entity is: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Business Corporation		<input type="checkbox"/> Non-Profit Corporation	
<input type="checkbox"/> Limited Liability Company		<input type="checkbox"/> Other Entity	
<input type="checkbox"/> Partnership (General, Limited, or Limited Liability Partnership)		<input type="checkbox"/> Sole Proprietorship	
7. The structure of the entity following conversion will be: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Business Corporation		<input type="checkbox"/> Limited Partnership	
<input type="checkbox"/> Non-Profit Corporation		<input type="checkbox"/> Limited Liability Partnership	
<input type="checkbox"/> Limited Liability Company			
8. The name of the entity following the conversion is: Food Coma Inc.			
9. This certificate of conversion and accompanying certificate of formation have been approved by the converting entity in the manner provided for in RIGL <u>7-1,2-1007</u> , <u>7-6-48.1</u> , <u>7-13-8.1</u> and <u>7-16-5.1</u> .			

**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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10. This certificate of conversion is filed as an accompanying certificate to: <b>CHECK ONE BOX ONLY</b>	
<input checked="" type="checkbox"/> Business Corporation Articles of Incorporation <input type="checkbox"/> Non-Profit Corporation Articles of Incorporation <input type="checkbox"/> Limited Liability Company Articles of Organization <input type="checkbox"/> Registration for Limited Liability Partnership <input type="checkbox"/> Certificate of Limited Partnership	
11. Date when this Certificate of Conversion will be effective: <b>CHECK ONE BOX ONLY</b>	
<input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date _____	
<i>Under penalty of perjury, we declare and affirm that we have examined this Certificate of Conversion, including any accompanying attachments, and that all statements contained herein are true and correct.</i>	
Type or Print Name of Converting Entity  Food Coma Inc.	
Type or Print Name of Person Signing  Adrienne D'Arconte	Title of Person Signing  Director
Signature  	Date  9/23/21
Type or Print Name of Person Signing	Title of Person of Signing
Signature	Date