



State of Rhode Island

Department of State - Business Services Division

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## Application for Certificate of Conversion to a Non-Rhode Island Entity

DOMESTIC Business Corporation, Limited Partnership or  
Limited Liability Company

→ Filing Fee: \$50.00 (business corporations, limited partnerships, and  
limited liability companies)

→ Filing Fee: \$25.00 (non-profit corporations)

STAMP

Pursuant to the applicable provisions of RIGL 7-1.2-1008(c), 7-6-48.3, 7-13-8.2 (d) and 7-16-5.2(e), the undersigned submits the following Certificate of Conversion for the purpose of converting to a Non-Rhode Island entity:

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| 1. Entity ID Number:<br><b>001689882</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2. The full name of the converting entity is:<br><b>McCarty Virtual Services LLC</b> |
| 3. It is formed under the state of:<br><b>RHODE ISLAND</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 4. The date of formation is:<br><b>11/09/2018</b>                                    |
| 5. The jurisdiction to which the entity is converting:<br><b>Iowa</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                      |
| 6. The structure of the converted entity will be. <b>CHECK ONE BOX ONLY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                      |
| <input type="checkbox"/> Business Corporation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> Limited Liability Company                        |
| <input type="checkbox"/> Non-Profit Corporation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Sole Proprietorship                                         |
| <input type="checkbox"/> Partnership (General, Limited or Limited Liability)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Other Entity                                                |
| 7. The name of the entity following the conversion is:<br><b>McCarty Virtual Services</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |
| 8. This conversion has been approved in the manner provided for in RIGL <u>7-1.2-1008</u> , <u>7-6-48.3</u> , <u>7-13-8.2</u> , and <u>7-16-5.2</u> .                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                      |
| 9. The converting entity revokes the authority of its registered/resident agent in this state to accept service of process, and consents that service of process in any action, suit, or proceeding based upon any cause of action arising in this state during the time the entity was authorized to transact business in this state may subsequently be made on the entity by service thereof on the Secretary of State of the State of Rhode Island, to which the converting entity irrevocably appoints the Secretary of State as its agent to accept such service of process. |                                                                                      |
| 10. The address to which the Secretary of State may mail a copy of any process against the entity that is served on the Secretary of State:<br><b>5667 Chatham St, Johnston, IA 50131</b>                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |

### 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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BY *[Signature]*

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------|
| 11. Date when this Certificate of Conversion will be effective: <b>CHECK ONE BOX ONLY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                      |                       |
| <input checked="checked" type="checkbox"/> Date received (Upon filing)                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                       |
| <input type="checkbox"/> Later effective date _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                       |
| 12. Fees and taxes paid:<br>The corporation or limited liability company certifies that it has no outstanding tax obligations. As required by RIGL § 7-1.2-1309 and RIGL § 7-16-8, the corporation or limited liability company has paid all fees and taxes. Note: Tax status can be verified by emailing <a href="mailto:tax.collections@tax.ri.gov">tax.collections@tax.ri.gov</a> . If the entity is a limited partnership, the original Letter of Good Standing issued by the RI Division of Taxation is attached hereto. |                                      |                       |
| <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<br><br>McCarty Virtual Services LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                      |                       |
| Type or Print Name of Person Signing<br><br>Meredith McCarty                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Title of Person Signing<br><br>Owner |                       |
| Signature<br><br>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      | Date<br><br>12/2/2021 |
| Type or Print Name of Person Signing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Title of Person of Signing           |                       |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                      | Date                  |