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State of Rhode Island

Department of State - Business Services Division

2022 FEB 3 A 10:06

**Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, 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:

|                                                                                                                                                                               |              |          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------|
| 1. The name of the limited liability company is:                                                                                                                              |              |          |
| PCC SPECIALTY PRODUCTS, LLC                                                                                                                                                   |              |          |
| Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |              |          |
| 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: DELAWARE                                                                                                                           |              |          |
| 3. The date of its organization is: 8/6/1984                                                                                                                                  |              |          |
| And the period of its duration is: CHECK ONE BOX ONLY                                                                                                                         |              |          |
| <input checked="" type="checkbox"/> Perpetual (on-going)                                                                                                                      |              |          |
| <input type="checkbox"/> Date certain for dissolution _____                                                                                                                   |              |          |
| 4. The name and address of the resident agent/office in Rhode Island is:                                                                                                      |              |          |
| Agent Name NATIONAL REGISTERED AGENT, INC.                                                                                                                                    |              |          |
| Street Address (NOT a P.O. Box) 450 VETERANS MEMORIAL PARKWAY, SUITE 7A                                                                                                       |              |          |
| City/Town                                                                                                                                                                     | State        | Zip Code |
| EAST PROVIDENCE                                                                                                                                                               | RHODE ISLAND | 02914    |
| 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:                                                                    |              |          |
| MANUFACTURING OF HEADER TOOLS.                                                                                                                                                |              |          |
| Check the box to indicate an attachment <input type="checkbox"/>                                                                                                              |              |          |

**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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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:

11676 Perry Hwy., Bldg. 2, Ste. 2101, Wexford, PA 15090

8. The mailing address for the limited liability company is:

4650 S Macadam Avenue, Ste. 300, Portland, OR 97239

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                                           |
|----------------|---------------------------------------------------|
| JIM PUETZ      | 4650 S MACADAM AVENUE STE 300, PORTLAND, OR 97239 |
| SHAWN R. HAGEL | 4650 S MACADAM AVENUE STE 400, PORTLAND, OR 97239 |
| RUTH A. BEYER  | 4650 S MACADAM AVENUE STE 400, PORTLAND, OR 97239 |
| ALAN J. POWER  | 915 118TH AVENUE S.E., STE 320 BELLEVUE, WA 98005 |

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status 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**

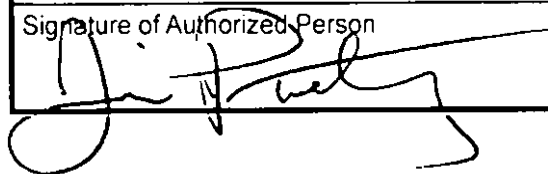
☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) \_\_\_\_\_

*Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.*

|                                                          |                |
|----------------------------------------------------------|----------------|
| Type or Print Name of LLC<br>PCC SPECIALTY PRODUCTS, LLC | Date<br>2/1/22 |
|----------------------------------------------------------|----------------|

Signature of Authorized Person



# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PCC SPECIALTY PRODUCTS, 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 TWENTY-FOURTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PCC SPECIALTY PRODUCTS, LLC" WAS FORMED ON THE SIXTH DAY OF AUGUST, A.D. 1984.

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



2041403 8300

SR# 20220220035

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202465702

Date: 01-24-22



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Nellie M. Gorbea**, *Secretary of State*

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:

February 03, 2022 10:06 AM

A handwritten signature in blue ink, reading "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

