



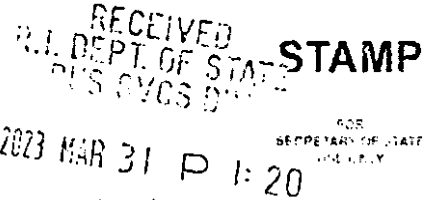
State of Rhode Island

Department of State - Business Services Division

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:

AMICUS II INVESTMENT HOLDINGS LLCIs this company organized in its state or country of formation as a low-profit limited liability company? Yes ☐ No ☒

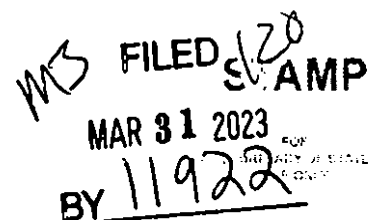
The name, if different, under which it proposes to register and transact business in Rhode Island is:

2. The LLC is organized under the laws of: **Delaware**3. The date of its organization is: **October 9, 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 **Robert Abelson**Street Address (NOT a P.O. Box) **168 Eaton Street**City/Town **Providence**State **RHODE ISLAND**Zip Code **02908**

5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Real estate investment, management, and holdingsCheck 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**

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:

190 Sperry Road, Bethany, CT 06524

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

190 Sperry Road, Bethany, CT 06524

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
Amicus II Manager, LLC	190 Sperry Road, Bethany, CT 06524

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**

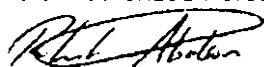
☒ Date received (Upon filing)

☐ 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 AMICUS II INVESTMENT HOLDINGS LLC	Date 3.31.2023
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Signature of Authorized Person By: **Amicus II Manager LLC, its Manager**



By: Robert Abelson, Manager

Delaware

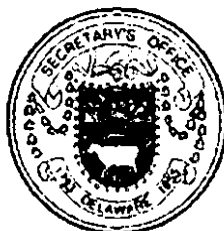
The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMICUS II INVESTMENT HOLDINGS 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-THIRD DAY OF FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMICUS II INVESTMENT HOLDINGS LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2020.

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

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

Jeffrey W. Bullock, Secretary of State

3854344 8300

SR# 20230669038

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202776556

Date: 02-23-23



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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:

March 31, 2023 01:20 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Gregg M. Amore
Secretary of State

