



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$150.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Foreign Limited Liability Company  
Application for Registration**

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

**ARTICLE I**

The name of the limited liability company is: GO MD USA LLC

*Enter your name exactly as it appears in your state. If your name includes an entity ending other than LLC or Limited Liability Company, complete Article II. The elected name in RI must include the entity ending LLC or Limited Liability Company.*

Check if this company is organized in its state or country of formation as a low-profit limited liability company.

**ARTICLE II**

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

**ARTICLE III**

The Limited Liability Company is organized under the laws of: State: SD Country: USA

The date this Application for Registration is to become effective, not prior to, nor more than 90 days after the filing of this Application for Registration.

Later Effective Date: 04/10/2023

**ARTICLE IV**

The date of its organization is: 12/22/2022

**ARTICLE V**

The period of its duration is:  Perpetual

**ARTICLE VI**

The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island:

No. and Street: 222 JEFFERSON BLVD

City or Town: WARWICK

State: RI

Zip: 02888

Name: INCorp SERVICES, INC

**Article VII**

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

TELECOMMUNICATIONS AND TELEHEALTH PROVIDER

**ARTICLE VIII**

The Rhode Island 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.

**ARTICLE IX**

The address of the office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized:

No. and Street: 3385 AIRWAYS BLVD STE 201

SUITE 201

City or Town: MEMPHIS

State: TN Zip: 38116 Country: USA

**ARTICLE X**

The mailing address for the limited liability company is:

No. and Street: 3385 AIRWAYS BLVD STE 201

SUITE 201

City or Town: MEMPHIS

State: TN Zip: 38116 Country: USA

**ARTICLE XI**

The limited liability company is to be managed by its     Members or   X   Managers (check one)

The name and address of each manager (If LLC is managed by Members, DO NOT complete this section):

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	APOLLO ARCALLANA	3385 AIRWAYS BLVD STE 201 MEMPHIS, TN 38116 USA

*This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

**Signed this 10 Day of April, 2023 at 3:55:03 PM by the Authorized Person.**

APOLLO ARCALLANA

Form No. 450  
Revised 09/07

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# State of South Dakota

## Office of the Secretary of State

### Certificate of Good Standing

Domestic Limited Liability Company

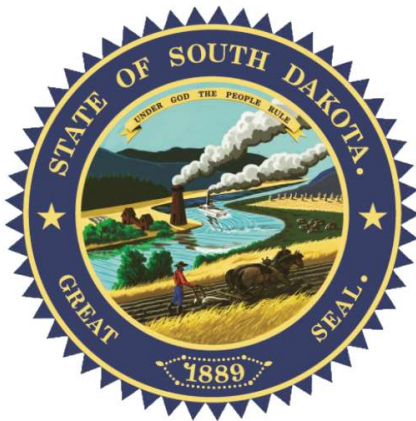
I, **Monae L. Johnson**, Secretary of State of the State of South Dakota, hereby certify that

**GO MD USA LLC**

Business ID: DL240838

was authorized to transact business in this state on: December 22, 2022.

I, further certify that **GO MD USA LLC** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



**IN TESTIMONY WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, March 18, 2023.

*Monae L. Johnson*

**Monae L. Johnson**  
Secretary of State

03/18/2023 7:28 PM

Verification #: 016417224



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:

April 10, 2023 03:54 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

