



State of Rhode Island

## Department of State - Business Services Division

## Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

RECEIVED  
R.I. DEPT. OF STATE  
BUS. SVC. DIV.  
2023 MAY 23 P 12:17  
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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:		
VYNAMIC LLC		
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" 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: CONNECTICUT		
3. The date of its organization is: 01/02/2004		
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 Capitol Corporate Services, Inc.		
Street Address (NOT a P.O. Box) 222 Jefferson Blvd Ste 200		
City/Town Warwick	State RHODE ISLAND	Zip Code 02888
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
CONSULTING SERVICES		
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

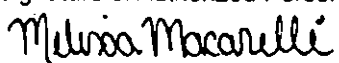
Website: www.sos.ri.gov

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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:  1600 ARCH STREET, STE 200, PHILADELPHIA, PA 19103	
8. The mailing address for the limited liability company is:  1600 ARCH STREET, STE 200, PHILADELPHIA, PA 19103	
9. Management of the Limited Liability Company:  The Limited Liability Company is to be managed by: <b>CHECK ONLY ONE BOX</b> <input checked="checked" type="checkbox"/> By its members (If you have checked this box, <b>DO NOT</b> fill out the chart below) <input type="checkbox"/> By one (1) or more managers (List managers below)	
MANAGER	ADDRESS
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> 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: <b>CHECK ONE BOX ONLY</b> <input checked="checked" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____	
<i>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.</i>	
Type or Print Name of LLC  VYNAMIC LLC	Date  05/17/2023
Signature of Authorized Person 	

# Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: May 19, 2023

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.


A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

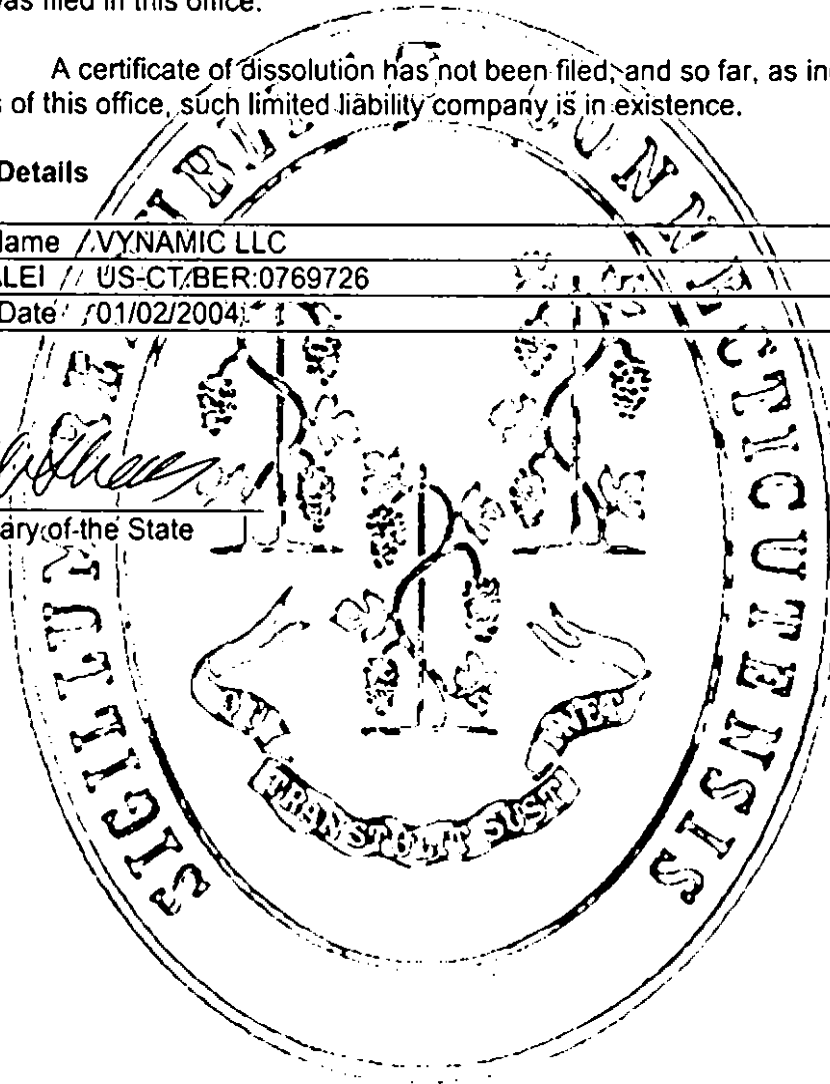
## Business Details

Business Name / VYNAMIC LLC

Business ALEI / US-CT.BER:0769726

Formation Date / 01/02/2004

  
Secretary of the State



Business ALEI: US-CT.BER:0769726

Certificate Number: C-00094322

Note: To verify this certificate, visit [Business.ct.gov](https://business.ct.gov)



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:

May 23, 2023 12:17 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

