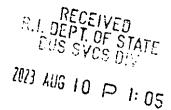
RI SOS Filing Number: 202340263200 Date: 8/10/2023 1:05:00 PM



Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00



Pursuant to the provisions of RIGL <u>7-16-49</u>, 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:

The name of the limited liability company is:			
NUWAVE ENERGY SOLUTIONS, LLC			
Is this company organized in its state or country of formation a	s a low-profit limited liability co	ompany? 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: Massachusetts			
3. The date of its organization is: 08/13/2019			
And the period of its duration is: CHECK ONE BOX ONLY			
X Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the resident agent/office in Rhode Island is:			
Agent Name C T Corporation System			
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A			
City/Town East Providence	State RHODE ISLAND	Zip Code 02914	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
ENERGY Services			
<u> </u>	Check the bo	x to indicate an attachment	

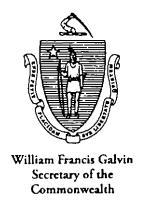
MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 10, 2023 TAVZ 4

FILED

6. The RI Department of State is appointed any time, there is no resident agent or if the diligence.	the agent of the foreign limited liability company for resident agent cannot be found or served following	r service of process if, at g the exercise of reasonable	
7. The address of the office required to be if not so required, of the principal office of t	maintained in the state or country of its organization the foreign limited liability company is:	by the laws of that state or,	
320 WASHINGTON STREET, SUITE 12, NO	DRWELL, MA 02061		
8. The mailing address for the limited liabil	ity company is:		
320 WASHINGTON STREET, SUITE 12, NO	DRWELL, MA 02061		
9. Management of the Limited Liability Cor	mpany:		
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)			
X By one (1) or more managers (List managers below)			
MANAGER	ADDRESS		
Ryan Blair	320 WASHINGTON STREET, SUITE 12, NORWELI	., MA 02061	
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: 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 aff accompanying attachments, and that all s	irm that I have examined this Application for Registi tatements contained herein are true and correct.	ration, including any	
Type or Print Name of LLC		Date	
NUWAVE ENERGY SOLUTIONS, LLC		08/03/2023	
Signature of Authorized Person			



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

August 8, 2023

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

NUWAVE ENERGY SOLUTIONS, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on August 13, 2019.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: RYAN BLAIR

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: RYAN BLAIR, RYAN A BLAIR

The names of all persons authorized to act with respect to real property listed in the most recent filing are: RYAN BLAIR

In testimony of which,

I have hereunto affixed the

Great Scal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travino Gallein

RI SOS Filing Number: 202340263200 Date: 8/10/2023 1:05:00 PM



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:

August 10, 2023 01:05 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

