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## Statement of Registration

FOREIGN Limited Partnership

Pursuant to the provisions of RIGL<u>7-13,1-1003</u>, the undersigned foreign limited partnership 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 partnership is:				
The Dimension Group I, LP				
The name, if different, which it elects to use in Rhode Island is:				
2. The limited partnership is organized under the laws of:	3. The date of its formation is:			
Texas	March 9, 1998			
Architectural and Engineering Professional Services				
5. The name and address of the registered agent/office in Rhode Island is:				
Agent Name Capitol Corporate Services, Inc.				
Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Blvd Ste 200				
City/Town Warwick	State RHODE ISLAND	Zip Code 02888		
6. The Department of State is appointed the agent of the fore time, there is no registered agent or if the registered agent ca diligence.				

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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7. The address, if applicable, of the office required to be maintained in the state or country of its organization is:				
10755 Sandhill Road Dallas, TX 75238				
8. The name and business address of each general partner is:				
GENERAL PARTNER	BUSINESS ADDRESS			
The Dimension Group, Inc.	10755 Sandhill Road, Dallas, TX 75238			
9. The address of the foreign limited partnership's principal place of business is:				
Address 10755 Sandhill Road				
City/Town Dallas		State TX	Zip Code 75238	
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 Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY   Image: Statement of Registration for a				
Under penalty of perjury, I declare and affirm that I have examined this Statement of Registration, including any accompanying attachments, and that all statements contained herein are true and correct.				
Type or Print Name of General Partner			Date	
The Dimension Group, Inc.			9/26/2023	
Signature of General Partner				

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Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

## Office of the Secretary of State

## **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate Of Limited Partnership for THE DIMENSION GROUP I, LP (file number 10662410), a Domestic Limited Partnership (LP), was filed in this office on March 09, 1998.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 26, 2023.



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Jane Nelson Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 TID: 10264

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Dial: 7-1-1 for Relay Services Document: 1288745330003



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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:

September 27, 2023 12:03 PM

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Gregg M. Amore Secretary of State

