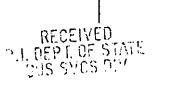
State of Rhode Island Department of State - Business Services Division

Application for Transfer of Authority

FOREIGN Business Corporation, Limited Partnership, Limited Liability Company, Limited Liability Partnership or Non-Profit Corporation



2023 DEC -8 P 1: 54

Pursuant to the applicable provisions of RIGL Title 7, the undersigned duly qualified foreign entity submits the following application for the purpose of transferring its authority to conduct business in the State of Rhode Island to:

1. Entity ID Number:	2. The full name of the entity filing this application is:			
001721414	Air Purchases of New Hampshire, Inc.			
3. The applicant is a duly qualified	foreign: (CHECK ONE B		· · · · · · · · · · · · · · · · · · ·	
o. The applicant is a duty qualified		OX ONET;		
Limited Liability Company	 Business Corporation Non-Profit Corporation 			
Limited Partnership Limited Liability Partnership				
4. The applicant submits this appli	cation for the purpose of	transferring its au	uthority to a: (CHECK ONE BOX ONLY)	
X Limited Liability Company (R	IGL <u>7-16-52.1</u>)	Business Corp	oration (RIGL <u>7-1.2-1411.1</u>)	
• • • • • • • •		Limited Partnership or Limited Liability Limited Partnership (RIGL <u>7-13.1-1009)</u>		
Limited Liability Partnership	(RIGL <u>7-12,1-1009</u>)			
5. The date the applicant qualified to conduct business in		6. The jurisdic	6. The jurisdiction upon transfer of authority is:	
Rhode Island is: 03-29-2021		Delaware	Delaware	
7. The name of the entity following	the transfer of authority i	 S:		
Air Purchases of New Hampshire, LL	C			
8. The application for transfer of a	uthority is filed as an acco	mpanying certific	cate to the: CHECK ONE BOX ONLY	
X Application for registration fo	r a Limited Liabilty Compa	any		
Application for certificate of authority for a Business Corporation				
Application for certificate of authority for a Non-Profit Corporation				
Statement of registration for a Limited Partnership				
Statement of registration for a registered Limited Liability Partnership				
9. This Transfer of Authority and a	oplicable Application/Cert	ficate/Notice mu	st be accompanied by a Certificate of Good	
Standing/Legal Existence from the	current jurisdiction of the	entity.		
MAIL TO:			FILED	
Division of Business Services 48 W. River Street, Providence, Rhode Phone: (401) 222-3040	Island 02904-2615		DEC 08 2023	

Website: www.sos.ni.gov

BY LKS

10. TO BE COMPLETED BY THE ENTITY TRANSFERRING AUTHORIT

Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Transfer of Authority, including any accompanying attachments, and that all statements contained herein are true and correct and that the undersigned is authorized to sign this certificate on behalf of the entity set forth above.

Date

Date

10/17/23

Type or Print Name of Limited Liability Company

Air Purchases of New Hampshire, LLC

Signature of Authorized Person

Signature of Aethorized Person

Type or Print Name of Corporation

Air Purchases of New Hampshire, Inc.

Signature of Authorized Person	Date
	10/17/23
Signature of Authorized Person	Date

Type or Print Name of Partnership				
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Signature of Partner	Date			
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Signature of Partner	Date			
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Signature of Partner	Date			
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Type or Print Name of Other Entity				
	r <u> </u>			
Signature of Authorized Person	Date			
	<u> </u>			
Signature of Authorized Person	Date			
	1			

If you have any questions, please call us at (401) 222-3040, Monday through Friday,

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:

December 08, 2023 01:54 PM

Areg M. Couve

Gregg M. Amore Secretary of State

