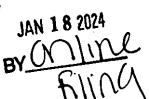


State of Rhode Island Office of the Secretary of State

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



FILED

Fee: \$150.00

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: Platlabs, 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.

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: DE 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: 01/19/2024

ARTICLE IV

The date of its organization is: 8/22/2022

ARTICLE V

The period of its duration is: X 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 BOULEVARD, SUITE 200

City or Town:

WARWICK

State: RI Zip: <u>02888</u>

Name:

CORPORATION SERVICE COMPANY

Article VII

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

RESELL CREDIT REPORTS AND TO CONDUCT SUCH OTHER LAWFUL BUSINESSES.

DETERMINED BY THE MEMBER

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:

251 LITTLE FALLS DRIVE

City or Town:

WILMINGTON

State: DE

Zip: <u>19808</u> Country: <u>USA</u>

ARTICLE X

The mailing address for the limited liability company is:

No. and Street:

30005 LADYFACE COURT

City or Town:

AGOURA HILLS

State: CA Zip: 91301 Country: USA

ARTICLE XI

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

* If you checked to be managed by your MEMBERS (the owners) DO NOT complete the following section. Only complete the following section if you checked to be managed by MANAGERS.

The name and address of each manager:

Title Individual Name **Address** Address, City or Town, State, Zip Code, Country First, Middle, Last, Suffix

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.

ned this 18 Day of January, 2024 at 12:06:32 PM by the Author	rized Person.
CHARD K SEMETA	
n No. 450 sed 09/07	
007 - 2024 State of Rhode Island Rights Reserved	

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PLATLABS, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE SIXTEENTH DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PLATLABS, LLC"

WAS FORMED ON THE TWENTY-SECOND DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202600013

Date: 01-16-24

6983418 8300 SR# 20240136285

You may verify this certificate online at corp.delaware.gov/authver.shtml