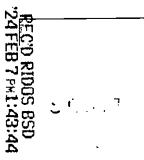


## Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00



Yes

No X

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:

The name of the limited liability company is:
Cassaday & Co Wealth Management, LLC
Is this company organized in its state or country of formation as a low-profit limited liability company?
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: Delaware

3. The date of its organization is: November 1, 2021

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

| ŀ | City/Town       | State        | Zip Code |
|---|-----------------|--------------|----------|
|   | East Providence | RHODE ISLAND | 02914    |
|   |                 |              |          |

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

Financial Services

Check the box to indicate an attachment

FEB - 7 2024 ł

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov

| 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:   |                      |  |  |  |  |
| 875 Third Avenue, 28th Floor, New York, NY 10022  |                      |  |  |  |  |
| 8. The mailing address for the limited liability company is:  |                      |  |  |  |  |
| 875 Third Avenue, 28th Floor, New York, NY 10022  |                      |  |  |  |  |
| 9. Management of the Limited Liability Company: CHECK ONE BOX ONLY  |                      |  |  |  |  |
| Members (Owners)<br>DO NOT complete the cha   |                      | anager(s). Complete the chart below.             |  |  |  |
|   | MANAGER(S) NAME      | ADDRESS  |  |  |  |
|   | Focus Operating, LLC | 875 Third Avenue, 28th Floor, New York, NY 10022 |  |  |  |
|   |                      |  |  |  |  |
|   | <u> </u>             | Check the box to indicate an attachment          |  |  |  |
| 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  |                      |  |  |  |  |
| X 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 affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.   |                      |  |  |  |  |
| Type or Print Name of LLC   |                      | Date 2/5/2024                                    |  |  |  |
| Cassaday & Co Wealth Management, LLC  |                      |  |  |  |  |
| Signature of Authenced Person   |                      |  |  |  |  |
|   |                      |  |  |  |  |

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CASSADAY & CO WEALTH MANAGEMENT, 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 FIFTH DAY OF FEBRUARY, A.D. 2024.

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



firmy W. Bull

Authentication: 202740833 Date: 02-05-24

Page 1

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SR# 20240363110 You may verify this certificate online at corp.delaware.gov/authver.shtml 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:

February 07, 2024 01:43 PM

Treg M. Coure

Gregg M. Amore Secretary of State

