



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
 24 FEB 23 PM 1:45:17

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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:

1. The name of the limited liability company is:		
Axient LLC		
Is this company organized in its state or country of formation as a low-profit limited liability company?		Yes No <input checked="" type="checkbox"/>
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:		
10/26/1991		
And the period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> 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 (<u>NOT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A		
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:		
Research and Development		
Check the box 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

FILED

FEB 23 2024

BY ML 16717

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:

1100 Redstone Gateway, STE 300, Huntsville AL 35808

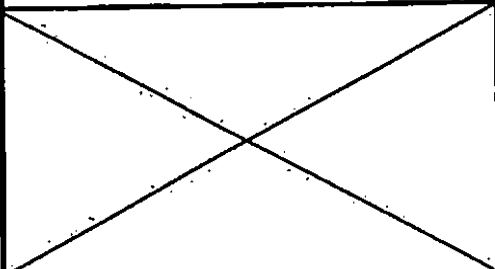
8. The mailing address for the limited liability company is:

1100 Redstone Gateway, STE 300 Huntsville, AL35808

9. Management of the Limited Liability Company: **CHECK ONE BOX ONLY**

Members (Owners)
DO NOT complete the chart below.

OR ☒ Manager(s). Complete the chart below.

	MANAGER(S) NAME	ADDRESS
	Angie Helms	1100 Redstone Gateway STE 300 Huntsville, AL 35808
	Gerald Burnett	1100 Redstone Gateway STE 300 Huntsville, AL 35808

Check the box to indicate an attachment

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status 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 affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

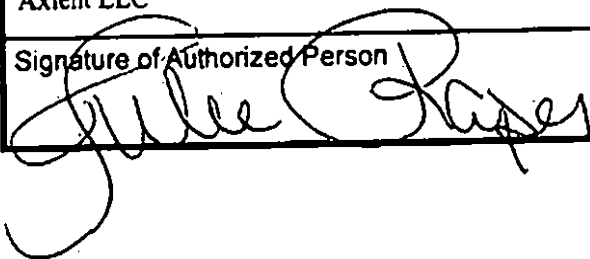
Type or Print Name of LLC

Axient LLC

Date

02/21/2024

Signature of Authorized Person



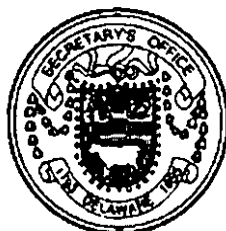
Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AXIENT 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 TWENTY-SECOND DAY OF FEBRUARY, A.D. 2024.

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



4941925 8300

SR# 20240623796

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202859747

Date: 02-22-24



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 23, 2024 01:45 PM

A handwritten signature in black ink that reads "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

