



State of Rhode Island
 Department of State - Business Services Division

REC'D R.I. SOS
 03/15/2024 2:24:53

Application for Certificate of Conversion

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

→ No Filing Fee

Pursuant to the applicable provisions of RIGL 7-1.2-1007, 7-6-48.1, 7-12.1-1143, 7-13.1-1143 and 7-16-5.1, the undersigned submits the following Certificate of Conversion:

1. Entity ID Number: 001764691	2. The full name of the converting entity is: Douglas Pike Smiles LLC						
3. It is formed under the jurisdiction of: Rhode Island	4. The date of formation is: 10/25/2023						
5. The jurisdiction to which the entity is converting: <p style="text-align: center;">RHODE ISLAND</p>							
6. The structure of the converting entity is. CHECK ONE BOX ONLY							
<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Business Corporation</td> <td><input type="checkbox"/> Non-Profit Corporation</td> </tr> <tr> <td><input checked="" type="checkbox"/> Limited Liability Company</td> <td><input type="checkbox"/> Other Entity</td> </tr> <tr> <td><input type="checkbox"/> Partnership (General, Limited, or Limited Liability Partnership)</td> <td><input type="checkbox"/> Sole Proprietorship</td> </tr> </table>		<input type="checkbox"/> Business Corporation	<input type="checkbox"/> Non-Profit Corporation	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Other Entity	<input type="checkbox"/> Partnership (General, Limited, or Limited Liability Partnership)	<input type="checkbox"/> Sole Proprietorship
<input type="checkbox"/> Business Corporation	<input type="checkbox"/> Non-Profit Corporation						
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Other Entity						
<input type="checkbox"/> Partnership (General, Limited, or Limited Liability Partnership)	<input type="checkbox"/> Sole Proprietorship						
7. The structure of the entity following conversion will be: CHECK ONE BOX ONLY							
<table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> Business Corporation</td> <td><input type="checkbox"/> Limited Partnership / Limited Liability Limited Partnership</td> </tr> <tr> <td><input type="checkbox"/> Non-Profit Corporation</td> <td><input type="checkbox"/> Limited Liability Partnership</td> </tr> <tr> <td><input type="checkbox"/> Limited Liability Company</td> <td></td> </tr> </table>		<input checked="" type="checkbox"/> Business Corporation	<input type="checkbox"/> Limited Partnership / Limited Liability Limited Partnership	<input type="checkbox"/> Non-Profit Corporation	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Liability Company	
<input checked="" type="checkbox"/> Business Corporation	<input type="checkbox"/> Limited Partnership / Limited Liability Limited Partnership						
<input type="checkbox"/> Non-Profit Corporation	<input type="checkbox"/> Limited Liability Partnership						
<input type="checkbox"/> Limited Liability Company							
8. The name of the entity following the conversion is: Douglas Pike Smiles Inc.							
9. This certificate of conversion and accompanying certificate of formation have been approved by the converting entity in the manner provided for in RIGL <u>7-1.2-1007</u> , <u>7-6-48.1</u> , <u>7-12.1-1143</u> , <u>7-13.1-1143</u> and <u>7-16-5.1</u> .							

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
 MAR 15 2024
 BY MLC/DIA
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10. This certificate of conversion is filed as an accompanying certificate to: **CHECK ONE BOX ONLY**

- Business Corporation Articles of Incorporation
- Non-Profit Corporation Articles of Incorporation
- Limited Liability Company Articles of Organization
- Statement of Limited Liability Partnership
- Certificate of Limited Partnership
- Statement of Limited Liability Limited Partnership

11. Date when this Certificate of Conversion will be effective: **CHECK ONE BOX ONLY**

- Date received (Upon filing)
- Later effective date _____

Under penalty of perjury, we declare and affirm that we have examined this Certificate of Conversion, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Converting Entity

Douglas Pike Smiles LLC

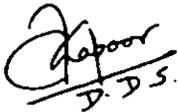
Type or Print Name of Person Signing

Abhishek Kapoor

Title of Person Signing

Managing Member

Signature



D. P. S.

Date

MARCH 4th, 2024

Type or Print Name of Person Signing

Title of Person of Signing

Signature

Date

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.