

State of Rhode Island Department of State - Business Services Division

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Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u>, 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 compa	ny is:			
KAG MERCHANT GAS GROUP, LLC				
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes No X				
The name, if different, under which it prop	poses to register and transact b	ousiness in Rhode Island is:		
2. The LLC is organized under the laws of	of: DELAWARE			
3. The date of its organization is: 01/22/2014				
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				
City/Town East Providence	State RHODE ISLAND	Zip Code 02914		
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
TRANSPORTATION FOR HIRE				
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		Check the box to indicate	o an attachment	
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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 21 2024 BY 6838

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:				
4366 MT. PLEASANT ST., NW, NORTH CANTON, OH 44720				
8. The mailing address for the limited liability company is:				
4366 MT. PLEASANT ST., NW, NORTH CANTON, OH 44720				
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY				
Members (Owners) OR X Manager(s). Complete the chart below. DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
	CHARLES DELACEY	4366 MT. PLEASANT ST., NW NORTH CANTON, OH 44720		
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				
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			
CHARLES DELACEY		3/20/24		
Signature of Authorized Person Charles DeLacey				

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "KAG MERCHANT GAS GROUP, 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 TWENTIETH DAY OF MARCH, A.D. 2024.

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

Authentication: 203070267

Date: 03-20-24