RI SOS Filing Number: 202454466540 Date: 5/16/2024 12:02:00 PM

5.



## State of Rhode Island Department of State - Business Services Division

### **Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

PM State Sta

STAMP

SECRETARY OF MIATE

Pursuant to the provisions of RIGL <u>7-16-49</u> applies for a Certificate of Registration to to purpose submits the following statement:				
1. The name of the limited liability compa	iny is:			
E9 Insight LLC				
Is this company organized in its state or	country of formation as a low-p	rofit limited liability company?	Yes No 🗹	
The name, if different, under which it pro	poses to register and transact t	ousiness in Rhode Island is:		
		-		
2. The LLC is organized under the laws of	<sup>of:</sup> Colorado			
3. The date of its organization is: 11/8/	2013		·	
And the period of its duration is: CHECK	ONE BOX ONLY			
✓ Perpetual (on-going)				
Date certain for dissolution				
4. The name and address of the resident	t agent/office in Rhode Island is	).		
Agent Name ParaSearch, Inc.				
Street Address (NOT a P.O. Box) 222 J	lefferson Boulevard			
City/Town Warwick	State RHODE ISLAND	Zip Code 02888		
5. The purpose or purposes which it prop	poses to pursue in the transacti	on of business in Rhode Island	are:	
Energy policy consulting services	3			
	. <u> </u>	Check the box to indicate	te 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 MAY 16 2024 A ZET

FORM 450 - Revised. 12/2023

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:				
3020 Jefferson Street, Boulder, Colorado 80304				
8. The mailing address for the limited liability company is:				
3020 Jefferson Street, Boulder, Colorado 80304				
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY				
Members (Owners)  OR  Manager(s). Complete the chart below.  DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
		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				
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		
E9 Insight, LLC		5/15/2024		
Signature of Authorized Person  Time Paule				

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

## CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

E9 Insight LLC

is a

#### Limited Liability Company

formed or registered on 11/08/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131647650.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/10/2024 that have been posted, and by documents delivered to this office electronically through 05/14/2024 @ 13:51:48.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 05/14/2024 @ 13:51:48 in accordance with applicable law. This certificate is assigned Confirmation Number 16035579



Secretary of State of the State of Colorado

\*\*End of Certificate\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosos.gov/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosos.gov.click."Businesses, trademarks, trade names." and select. "Frequently Asked Questions."

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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:

May 16, 2024 12:02 PM

Gregg M. Amore

Secretary of State

Tregs M. Coure

