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State of Rhode leland Department of State - Business Services Division

### **Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

REC'D	· _
RIDOS BSD 4 #11:35:24	

Pursuant to the provisions of RiGL <u>7-16</u> applies for a Certificate of Registration to purpose submits the following statement	to transact business in the State			
1. The name of the limited liability company is:				
KENNEY & SAMS, PLLC				
is this company organized in its state or country of formation as a tow-profit limited liability company? Yes 💢 No 🛄				
The name, if different, under which it proposes to register and transact business in Rhode Island is:				
KENNEY & SAMS, LLC				
2. The LLC is organized under the laws of: Massachusetts				
3. The date of its organization is: 1/8/2024				
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 agent/office in Rhode Island is:				
Agent Name Orson and Brusini Ltd.				
Street Address (NOT a P.O. Box) 211 Quaker Lane, Sulte 201				
City/Town West Warwick	State RHODE ISLAND	Zip Code 02893		
6. The purpose or purposes which it pro	oposes to pursue in the transac	tion of business in Rhode Island	are:	
Practice of law.				
		Check the box to indica	te an attachment	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2815
Phone: (401) 222-3040
Websits: www.sos.ri.gov

MY FILED 1/35 JUN - 4 2024 BY WNOZM

<ol><li>The RI Department of State is appoin any time, there is no resident agent or if diligence.</li></ol>	ted the agent of the foreign lim the resident agent cannot be	ited liability company for service of process if, at found or served following the exercise of reasonable		
7. The address of the office required to if not so required, of the principal office 144 Turnpike Road, 3rd Floor Southborough, MA 01772	be maintained in the state or co of the foreign limited liability co	ountry of its organization by the laws of that state or, mpany is:		
8. The mailing address for the limited liability company is:				
144 Tumpike Road, 3rd Floor Southborough, MA 01772				
9. Management of the Limited Liability C	ompany: CHECK ONE BOX (	DNLY		
Members (Owners) OR Manager(s). Complete the chart below.  DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
	Michael P. Sams	144 Turnpike Road, 3rd Floor Southborough, MA 01772		
	Christopher A. Kenney	144 Turnpike Road, 3rd Floor Southborough, MA 01772		
		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 Certific	cate of Registration will be effe	ctive: 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		
Michael P. Sams		5/20/2024   11:00 AM PDT		
Signature of Authorized Person				
M (1/2)				

## ADDENDUM TO STATE OF RHODE ISLAND APPLICATION FOR REGISTRATION FOR KENNEY & SAMS, PLLC

9. Names and Addresses of Additional Managers:

John Nathan Cole 144 Tumpike Road, 3rd Floor, Southborough, MA 01772 USA



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

May 28, 2024

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### **KENNEY & SAMS, PLLC**

in accordance with the provisions of Massachusetts General Laws Chapter 156C on January 8, 2024.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: JOHN NATHAN COLE, MICHAEL P. SAMS, CHRISTOPHER A. KENNEY

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JOHN NATHAN COLE, MICHAEL P. SAMS, CHRISTOPHER A. KENNEY

The names of all persons authorized to act with respect to real property listed in the most recent filing are: JOHN NATHAN COLE, MICHAEL P. SAMS, CHRISTOPHER A. KENNEY



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travino Galicin

Processed By:mqc

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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:

June 04, 2024 11:35 AM

Gregg M. Amore Secretary of State

Treg M. Coure

