R	State of Rhode Island Office of the Secretary of State	Fee: \$150.00		
	Division Of Business Services			
	148 W. River Street			
	Providence RI 02904-2615			
1636	(401) 222-3040			
Application for	I Liability Company Registration of the General Laws of Rhode Island, 1956, as amended)			
The name of the limited liability company is: <u>Rycor LLC</u>				
Enter your name exectly as it appears in your state. If your name includes an entity ending other than LLC or Limited Liability Company, complete Article II. The elected name in RI must include the entity ending LLC or Limited Liability Company.				
	ARTICLE II			
The name, if different, under which it proposes to register and transact business in Rhode Island is:				
ARTICLE III				
The Limited Liability Company is organized under the laws of: State: <u>NY</u> Country: <u>USA</u>				
The date this Application for Registration is to become effective, not prior to, nor more than 90 days after the filing of this Application for Registration.				
Later Effective Date: 07/01/2024				
	ARTICLE IV BY	online		
The date of its organization is: 2/22/2006		11:45 Am		
	ARTICLE V			
The period of its duration is: <u>X</u> Perpetual				
ARTICLE VI				
The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island:				
No. and Street:	222 JEFFERSON BOULEVARD SUITE 200			
City or Town:	WARWICK Sta	ate: RI Zip: <u>02888</u>		
Name:	CORPORATION SERVICE COMPANY			
Article VII				

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The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
SALE AND INSTALL OF HVAC UNITS				
ARTICLE VIII				
The Rhode Island 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.				
ARTICLE IX				
The address of the office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized:				
No. and Street:	135 NORTH CHESTNUT ST			
City or Town:	NEW PALTZ	State: NY Zip: <u>12561</u> Country: US		
ARTICLE X				
The mailing address for the limited liability company is:				
No. and Street:	. <u>4 INTERNATIONAL DRIVE</u> <u>SUITE 210</u>			
City or Town:	RYE BROOK	State: <u>NY</u> Zip: <u>10573</u> Country: <u>US</u>		
ARTICLE XI				
The limited liability company is to be managed by its Members* or _X Managers (check one)				
* If you checked to be managed by your MEMBERS (<i>the owners</i>) DO NOT complete the following section. <u>Only</u> complete the following section if you checked to be managed by MANAGERS.				
The name and address of each manager:				
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country		
MANAGER	SHAWN PODZIEWSKI	130 SOUTHBRIDGE ROAD NORTH OXFORD, MA 01537 US		
MANAGER	TED TESCHNRE	4 INTERNATIONAL DRIVE SUITE 210 RYE BROOK, NY 10573 US		
This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is				

that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 5 Day of June, 2024 at 11:45:24 AM by the Authorized Person.

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JOHN MOELLER

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Form No. 450 Revised 09/07

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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: DOS ID Number: Entity Type: Entity Status: Date of Initial Filing with DOS:

Statement Status: Statement Due Date: RYCOR, LLC 3323794 DOMESTIC LIMITED LIABILITY COMPANY EXISTING 02/22/2006

nt Due Date: 02/28/2026

No information is available from this office regarding the financial condition, business activity or practices of this entity.

CURRENT



WITNESS my hand and official scal of the Department of State, at the City of Albany, on February 10, 2024 at 09:38 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Hughan

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100005172947 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <u>http://ccorp.dos.ny.gov</u> 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:

June 11, 2024 11:45 AM

Treng M. Course

Gregg M. Amore Secretary of State

