RI SOS Filing Number: 202458581960 Date: 8/5/2024 1:14:00 PM



State of Rhode Island
Department of State - Business Services Division

## Application for Registration

**FOREIGN Limited Liability Company** 

→ Filing Fee: \$150.00

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Pursuant to the provisions of RIGL 7-16-49, 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 company is: SHANNON INVESTMENTS LLC Is this company organized in its state or country of formation as a low-profit limited liability company? No 📝 The name, if different, under which it proposes to register and transact business in Rhode Island is: 2. The LLC is organized under the laws of: Nevada 3. The date of its organization is: 01/17/2018 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 Registered Agent Solutions, Inc. Street Address (NOT a P.O. Box) 222 Jefferson Blvd. Suite 200 City/Town State Zip Code Warwick 02888 RHODE ISLAND 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Mortgage loan origination Check the box to indicate 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 AUG 0 5 2024
BY 9444Z
BY 9444Z

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:				
8965 S. Eastern Ave #190 Las Vegas, NV 89123				
8. The mailing address for the limited liability company is:				
8965 S. Eastern Ave #190 Las Vegas, NV 89123				
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		
	Roseann Shannon	504 Whitewood Dr Henderson, NV 89052		
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			
SHANNON INVESTMENTS LLC	8/1/2024			
Signature of Authorized Person Rougue Shark				

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence SHANNON INVESTMENTS LLC as a DOMESTIC LIMITED-LIABILITY COMPANY (86) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 01/17/2018, and in good standing in this State.

Certificate Number: B202408024852332

You may verify this certificate

online at https://www.nvsilverflume.gov/home

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of this State, at my office on 08/02/2024.

FRANCISCO V. AGUILAR Secretary of State RI SOS Filing Number: 202458581960 Date: 8/5/2024 1:14:00 PM



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:

August 05, 2024 01:14 PM

Gregg M. Amore Secretary of State

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