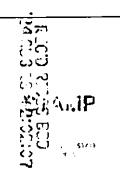


## State of Rhode Island Department of State - Business Services Division

### **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:				
NTI Colorado, LLC					
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes 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	of: Colorado				
3. The date of its organization is: 2/16/2023					
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 proj	poses to pursue in the transac	tion of business in Rhode Island	are:		
Design, install and maintain AV, security and communications systems					
		Check the box to indica	te an atta	chment	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

AUG 1 9 2024

BY SOVAZ

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:					
425 W 115th Ave, Suite 4 Northglenn, CO 80234, United States					
8. The mailing address for the limited liability company is:					
8340 Helgerman Ct, Gaithersburg, MD 20877, United States					
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			
$\times$					
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					
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			
NTI Colorado, LLC		7/16/2024			
Signature of Authorized Person — Docusigned by:					
Bart Rowe - CFO  Bartludomew Rowe  DRESTSCORRERURA					

# 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,

NTI Colorado LLC

is a

#### Limited Liability Company

formed or registered on 02/16/2023 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 20231176566.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/03/2024 that have been posted, and by documents delivered to this office electronically through 07/08/2024 @ 16:03:09.

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 07/08/2024 @ 16:03:09 in accordance with applicable law. This certificate is assigned Confirmation Number 16188935



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."

RI SOS Filing Number: 202458938340 Date: 8/19/2024 2:02:00 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 19, 2024 02:02 PM

Gregg M. Amore
Secretary of State

Tregs M. Coure

