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
(401) 222-3040

Foreign Limited Liability Company Application for Registration

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited liability company is: Masterson Enterprise LLC

Enter your name exactly 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: FL Country: USA

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: 08/21/2024

ARTICLE IV

The date of its organization is: 8/23/2022

ARTICLE V

The period of its duration is: X Perpetual __

ARTICLE VI

The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island:

No. and Street: 6 CARDI CIRCLE
City or Town: CRANSTON State: RI Zip: 02920
Name: JESSICA TRACY

Article VII

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

TO ENGAGE IN THE BUSINESS OF CONSTRUCTING, REMODELING, AND REPAIRING
RESIDENTIAL AND COMMERCIAL STRUCTURES AND THEIR APPURTENANCES

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: 3369 S FEDERAL HWY
UNIT E
City or Town: BOYNTON BEACH State: FL Zip: 33435 Country: USA

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 3369 S FEDERAL HWY
UNIT E
City or Town: BOYNTON BEACH State: FL Zip: 33435 Country: USA

ARTICLE XI

The limited liabilty company is to be managed by its X Members* or __ Managers (check one)

*** If you checked to be managed by your MEMBERS (*the owners*) DO NOT complete the following section. Only 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

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 21 Day of August, 2024 at 10:22:11 AM by the Authorized Person.

WAYNE MASTERSON

Form No. 450
Revised 09/07

© 2007 - 2024 State of Rhode Island
All Rights Reserved

State of Florida
Department of State

I certify from the records of this office that MASTERSON ENTERPRISE LLC is a limited liability company organized under the laws of the State of Florida, filed on August 23, 2022, effective August 16, 2022.

The document number of this limited liability company is L22000371113.

I further certify that said limited liability company has paid all fees due this office through December 31, 2024, that its most recent annual report was filed on August 3, 2024, and that its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Third day of August, 2024

Secretary of State

Tracking Number: 0256449854CC

To authenticate this certificate,visit the following site,enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

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:

August 21, 2024 10:21 AM

Gregg M. Amore
Secretary of State