



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: C-Scape Partnership, 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: SC 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: 5/12/2016

ARTICLE V

The period of its duration is: Perpetual

ARTICLE VI

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

No. and Street: THE CAPALBO BUILDING
67 HIGH STREET

City or Town: WESTERLY

State: RI Zip: 02891

Name: THOMAS J. CAPALBO, III

Article VII

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

OWNERSHIP AND MANAGEMENT OF REAL ESTATE

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: 32 SINGLETON BEACH PLACE

City or Town: HILTON HEAD ISLAND

State: SC Zip: 29928 Country: USA

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 70 SOMERSBY WAY

City or Town: FARMINGTON

State: CT Zip: 06032 Country: USA

ARTICLE XI

The limited liability 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
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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 4:17:14 PM by the Authorized Person.

THOMAS J. CAPALBO, III

Form No. 450
Revised 09/07

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The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina, Hereby Certify that:

C-SCAPE PARTNERSHIP, LLC, a limited liability company duly organized under the laws of the State of South Carolina on May 12th, 2016, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C.Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
12th day of May, 2016.


Mark Hammond, Secretary of State

STATE OF SOUTH CAROLINA
SECRETARY OF STATE
ARTICLES OF ORGANIZATION
Limited Liability Company – Domestic
Filing Fee - \$110.00

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

MAY 12 2016

Mark Hammond
SECRETARY OF STATE OF SOUTH CAROLINA

TYPE OR PRINT CLEARLY IN BLACK INK

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to S.C. Code of Laws §33-44-202 and §33-44-203.

1. The name of the limited liability company (**Company ending must be included in name***)
C-Scape Partnership, LLC

***NOTE: The name of the limited liability company must contain one of the following endings: "limited liability company" or "limited company" or the abbreviation "L.L.C.", "LLC", "L.C." "LC", or "Ltd. Co."**

2. The address of the initial designated office of the limited liability company in South Carolina is
32 Singleton Beach Place

Street Address
Hilton Head Island 29928
City Zip Code

3. The initial agent for service of process is
Michael C. Cerrati, Esq.

Name

Michael C. Cerrati
Signature of Agent

and the street address in South Carolina for this initial agent for service of process is
Jolley Law Group, LLC, 90 Main Street, Suite C

Street Address
Hilton Head Island 29926
City Zip Code

4. List the name and address of each organizer. Only one organizer is required, but you may have more than one.

- (a) Radu Chindris

Name

23 Woodeden Lane

Street Address

Bluffton

South Carolina

29910

City

State

Zip Code

- (b)

Name

Street Address

160512-0236

FILED: 05/12/2016

C-SCAPE PARTNERSHIP, LLC

Filing Fee: \$110.00 ORIG



Mark Hammond

South Carolina Secretary of State

Zip Code

Form Revised by South Carolina
Secretary of State, July 2012

5. Check this box only if the company is to be a term company. If the company is a term company, provide the term specified. _____

6. Check this box only if management of the limited liability company is vested in a manager or managers. If this company is to be managed by managers, include the name and address of each initial manager.

(a) _____
Name

Street Address

City State Zip Code

(b) _____
Name

Street Address

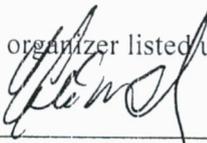
City State Zip Code

7. Check this box only if one or more of the members of the company are to be liable for its debts and obligations under §33-44-303(c). If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members. This provision is optional and does not have to be completed.

8. Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary of State. Specify any delayed effective date and time.

9. Any other provisions not inconsistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement may be included on a separate attachment. Please make reference to this section if you include a separate attachment.

10. Each organizer listed under number 4 must sign.



Signature of Organizer

May 11, 2016

Date

Signature of Organizer

Date

Filing Checklist

- Two completed copies of this form must be submitted for filing.
- \$110.00 made payable to the South Carolina Secretary of State
- **Self-addressed, stamped return envelope**
- Make sure the organizer has signed the form. Only one organizer is required, but you may have more than one. If you have more than one organizer, every organizer listed on the form must sign. The organizer is the individual who completes the documents and delivers them for filing to the Secretary of State. The organizer may be an owner of the entity, but he or she does not have to be. The organizer may simply be an individual who assists in the formation of the LLC without having any involvement with subsequent ownership or operational functions.
- Return all documents to:
 - South Carolina Secretary of State's Office
 - Attn: Corporate Filings
 - 1205 Pendleton Street, Suite 525
 - Columbia, SC 29201

SPECIAL NOTE

Registering your limited liability company name does not, in and of itself, provide an exclusive right to use this name on or in connection with any product or service. Use of a name as a trademark or service mark requires further clearance and registration and may be affected by prior use of the mark. For more information, contact the Trademarks Division of the Secretary of State's Office.

Customer Receipt

Receipt Number: 946946
Printed on 5/12/2016 3:03:19 PM
Operator ID: HLEAS
Submitter Name:
PUBLIC

Charges

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DLC-ARTICLES OF ORGANIZATION

File ID: 160512-0236
Filed Date: 05/12/2016 03:03:18 PM

Recording Fee \$110.00

Subtotal: \$110.00

Payments

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Check #5040 \$110.00

Totals

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Total Charges	\$110.00
Total Payments	\$110.00
Balance	\$0.00