RI SOS Filing Number: 202459225340 Date: 9/5/2024 1:30:00 PM



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:

The name of the limited liability compa	iny is:	· · · · · · · · · · · · · · · · · · ·	
Stran Loyalty Solutions, 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 pro	poses to register and transact	business in Rhode Island is:	
2. The LLC is organized under the laws of	of: State of Nevada		
3. The date of its organization is: 7/11/24	4		
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 (<u>NOT</u> 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 proposes to pursue in the transaction of business in Rhode Island are:			
Marketing & Merchandising			
	<u> </u>	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 FILED STAMP

SEP 0 5 2024 BY STRW H

EORM 450 - Revised: 12/202

· · · · · · · · · · · · · · · · · · ·		ed liability company for service of process if, at und or served following the exercise of reasonable		
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:				
16845 Von Karman Ave., Suite 150, Irvine, CA 92606				
8. The mailing address for the limited liability company is:				
16845 Von Karman Ave., Suite 150, Irvine, CA 92606				
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY				
Members (Owners) OR X Manager(s). Complete the chart below. DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
	Stran & Company, Inc.	2 Heritage Drive., Suite 600 Quincy, MA 02171		
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		
Stran Loyalty Solutions, LLC		9/4/24		
Signature of Authorized Person				

100 142014 Walter Vissas Calina

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 Stran Loyalty Solutions, 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 07/11/2024, and in good standing in this State.

Certificate Number: B202408294916461

You may verify this certificate

こうこうかん フランカのからなる

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

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Scal of this State, at my office on 08/29/2024.

FRANCISCO V. AGUILAR Secretary of State RI SOS Filing Number: 202459225340 Date: 9/5/2024 1:30:00 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:

September 05, 2024 01:30 PM

Gregg M. Amore

Secretary of State

Treg M. Coure

