RI SOS Filing Number: 202459324700 Date: 9/11/2024 2:20:00 PM

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

Application for Registration FOREIGN Limited Liability Company

> Filing Fee: \$150.00

pplies for a Certificate of Registration to to urpose submits the following statement:		
The name of the limited liability compare	<u> </u>	
NH BV Commons Tenant, LLC		
s this company organized in its state or c		
The name, if different, under which it prop	poses to register and transact b	usiness in Rhode Island is:
2. The LLC is organized under the laws of	of: Delaware	
3. The date of its organization is: 9-3-20	24	
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 Ve	terans Memorial Parkway, Suite 7.	A
City/Town East Providence	State RHODE ISLAND	Zip Code 02914
5. The purpose or purposes which it pro To provide assisted living and memory care		on of business in Rhode Island are:

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

SEP 11 2024

FORM 450 - Revised: 12/2023

any time, there is no resident agent or if t diligence.	he resident agent cannot be	nited liability company for service of process if, at found or served following the exercise of reasonable		
7. The address of the office required to be if not so required, of the principal office of 1585 Broadway, New York, NY 10036	f the foreign limited liability co	ountry of its organization by the laws of that state or, ompany is:		
8. The mailing address for the limited liability company is:				
1585 Broadway, New York, NY 10036	·			
9. Management of the Limited Liability Co	ompany: CHECK ONE BOX	ONLY		
Members (Owners) OR Manager(s). Complete the chart below. DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
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 a accompanying attachments, and that all	ffirm that I have examined the statements contained hereir	is Application for Registration, including any are true and correct.		
Type or Print Name of LLC	Date September 10, 2024			
NH BV Commons Tenant, LLC	•			
Signature of Authorized Person				
Weyja Sim				

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NH BV COMMONS TENANT, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TENTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 204352160

Date: 09-10-24

4931298 8300

SR# 20243643557

You may verify this certificate online at corp.delaware.gov/authver.shtml

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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 11, 2024 02:20 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

