

RI DOS MADE NON-SUBSTANTIVE EDITS



State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: \$150.00

FILED

LKS

SEP 25 2024

BY 1211588 2:41pm

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: Naturebarrels 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: DE 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: 09/25/2024

ARTICLE IV

The date of its organization is: 4/22/2021

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: 47 WOOD AVE.
STE 2

City or Town: BARRINGTON

State: RI Zip: 02806

Name: Registered Agents Inc

Article VII

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

THE PURPOSE OF THE LLC IS TO ENGAGE IN THE CREATION, SALE, AND DISTRIBUTION OF ORIGINAL BOOKS, ARTWORK, PRINTED GOODS, AND CLOTHING, AS WELL AS ANY OTHER LAWFUL BUSINESS ACTIVITIES PERMITTED UNDER THE LAWS OF THE STATE OF RHODE ISLAND.

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: 8 THE GREEN
STER
City or Town: DOVER State: DE Zip: 19901 Country: USA

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 108 HARRISON AVE
#9
City or Town: NEWPORT State: RI Zip: 02840 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 25 Day of September, 2024 at 2:41:55 PM by the Authorized Person.

MARCELO TORRES

Form No. 450
Revised 09/07

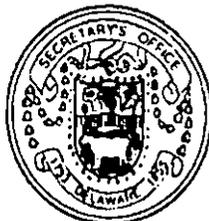
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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATUREBARRELS 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2024.



5865086 8300

SR# 20243717379

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204426645

Date: 09-18-24



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:

September 25, 2024 02:41 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

