| State of Rhode Island Fee: \$150.00 | | | | | |
|---|--|--|--|--|--|
| Office of the Secretary of State | | | | | |
| Division Of Business Services 148 W. River Street | | | | | |
| Providence RI 02904-2615 | | | | | |
| 1636 (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: <u>Memory Station LLC</u> | | | | | |
| 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: \underline{TX} Country: \underline{US} | | | | | |
| 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: 03/07/2025 | | | | | |
| ARTICLE IV | | | | | |
| The date of its organization is: $3/16/2023$ | | | | | |
| ARTICLE V | | | | | |
| The period of its duration is: <u>X</u> Perpetual | | | | | |
| ARTICLE VI | | | | | |
| The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island: | | | | | |
| No. and Street: <u>1961 CRANSTON STREET</u> | | | | | |
| City or Town:CRANSTONState: RIZip: 02920 | | | | | |
| Name: <u>ERIC PARRILLO</u> | | | | | |
| Article VII | | | | | |

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

PHOTO BOOTHS PLACED IN MALLS OR BARS

| 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: City or Town: | <u>1607 HAZY HILLS LOOP</u> <u>DRIPPING SPRINGS</u> | State: <u>TX</u> | Zip: <u>78620</u> | Country: <u>US</u> | |
| ARTICLE X | | | | | |
| The mailing address for the limited liability company is: | | | | | |
| No. and Street: City or Town: | <u>1607 HAZY HILLS LOOP</u> <u>DRIPPING SPRINGS</u> | State: <u>TX</u> | Zip: <u>78620</u> | Country: <u>US</u> | |
| ARTICLE XI | | | | | |
| The limited liabilty company is to be managed by its <u>X</u> Members* or <u>Managers</u> (check one) | | | | | |
| * If you checked to be managed by your MEMBERS (<i>the owners</i>) DO NOT complete the following section. <u>Only</u> 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 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 8 Day of March, 2025 at 12:30:11 AM by the Authorized Person. | | | | | |

DAYNA DEMCHAK

Form No. 450 Revised 09/07

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Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Memory Station LLC (file number 804974157), a Domestic Limited Liability Company (LLC), was filed in this office on March 16, 2023.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 18, 2025.



ave-Albert

Jane Nelson Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 1453463790003 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:

March 08, 2025 12:24 AM

Areg M. Couve

Gregg M. Amore Secretary of State

