

# 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: 96pt. 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: MA 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:

# **ARTICLE IV**

The date of its organization is: 3/5/2010

# **ARTICLE V**

The period of its duration is: X Perpetual

# **ARTICLE VI**

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

No. and Street: 700 NARRAGANSETT PARK DR

**SUITE 100** 

City or Town: PAWTUCKET State: RI Zip: 02861

Name: NORTHWEST REGISTERED AGENT LLC

#### Article VII

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

# **DESIGN SERVICES**

#### **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: <u>135 THORNDIKE ST</u>

City or Town: <u>ARLINGTON</u> State: <u>MA</u> Zip: <u>02474</u> Country: <u>USA</u>

## **ARTICLE X**

The mailing address for the limited liability company is:

No. and Street: <u>135 THORNDIKE ST</u>

City or Town: ARLINGTON State: MA Zip: 02474 Country: USA

# **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 (*the owners*) DO NOT complete the following section. <u>Only</u> complete the following section if you checked to be managed by MANAGERS.

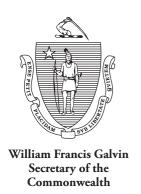
The name and address of each manager:

Title	Individual Name	Address
	First, Middle, Last, Suffix	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 27 Day of March, 2025 at 12:09:46 PM by the Authorized Person.

MICHELE PHELAN	
Form No. 450 Revised 09/07	
© 2007 - 2025 State of Rhode Island All Rights Reserved	



# The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02133

Date: March 26, 2025

To Whom It May Concern:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

# 96PT. LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C, on **March 05, 2010.** 

I further certify that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Villein Travis Galicin

Certificate Number: 25030554410

Verify this Certificate at: https://corp.sec.state.ma.us/corpweb/Certificates/Verify.aspx

Processed by: tad