



State of Rhode Island  
Department of State - Business Services Division

**Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

REC'D RIDOS BSD  
25 JUN 4 PM 3:28:13  
FOR  
CLERK OF COURT  
OFFICE

Pursuant to the provisions of RIGL 7-16-49, 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:

1. The name of the limited liability company is:

Greystone Utility Services 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 proposes to register and transact business in Rhode Island is:

2. The LLC is organized under the laws of: Delaware

3. The date of its organization is: March 25, 2025

And the period of its duration is: CHECK ONE BOX ONLY

☒ Perpetual (on-going)

☐ Date certain for dissolution \_\_\_\_\_

4. The name and address of the resident agent/office in Rhode Island is:

Agent Name Capitol Corporate Services, Inc.

Street Address (NOT a P.O. Box) 222 Jefferson Blvd Ste 200

City/Town Warwick

State RHODE ISLAND

Zip Code 02888

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

Specializing in powerline construction, maintenance, storm restoration, and emergency response.

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

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6. The RI 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.

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:

596 Gillespie Road, DSL of Grand Falls, New Brunswick, Canada E3Z 1J2

8. The mailing address for the limited liability company is:

PO Box 257  
Limestone, ME 04750

9. Management of the Limited Liability Company: **CHECK ONE BOX ONLY**

☒ Members (Owners)  
DO NOT complete the chart below.

OR

☐ Manager(s). Complete the chart below.

|  | MANAGER(S) NAME | ADDRESS |
|--|-----------------|---------|
|  |                 |         |
|  |                 |         |

Check the box to indicate an attachment ☐

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status 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**

☒ 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

Greystone Utility Services LLC

Date

June 2, 2025 | 1:44 PM EDT

Signature of Authorized Person

DocuSigned by:

*Alain Belanger*

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# Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GREYSTONE UTILITY SERVICES 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 THIRD DAY OF JUNE, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GREYSTONE UTILITY SERVICES LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF MARCH, A.D. 2025.

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



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SR# 20252944329

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

*C. P. Sanchez*

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 203846865

Date: 06-03-25



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:

June 04, 2025 03:28 PM

A handwritten signature in black ink that reads "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

