



**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: APRI Administrative Payroll Company, 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: 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:

ARTICLE IV

The date of its organization is: 5/29/2025

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: 222 JEFFERSON BLVD

City or Town: WARWICK

State: RI Zip: 02888

Name: INCORPORATING SERVICES, LTD.

Article VII

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

PAYROLL 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: 280 MERRIMACK STREET

City or Town: METHUEN

State: MA

Zip: 01844

Country: US

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 280 MERRIMACK STREET

City or Town: METHUEN

State: MA

Zip: 01844

Country: US

ARTICLE XI

The limited liability company is to be managed by its ___ Members* or X 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
MANAGER	MARK CAFUA	280 MERRIMACK STREET METHUEN, MA 01844 US
MANAGER	GREGORY CAFUA	280 MERRIMACK STREET METHUEN, MA 01844 US
MANAGER	DAVID CAFUA	280 MERRIMACK STREET METHUEN, MA 01844 US

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 12 Day of June, 2025 at 10:33:52 AM by the Authorized Person.

MARK CAFUA

Form No. 450
Revised 09/07

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Delaware

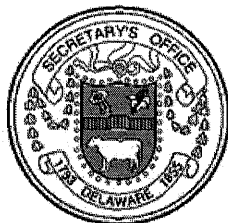
The First State

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I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "APRI ADMINISTRATIVE PAYROLL COMPANY 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 "APRI ADMINISTRATIVE PAYROLL COMPANY LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MAY, A.D. 2025.

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



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SR# 20252938945

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

A handwritten signature in black ink, reading "C. P. Sanchez", written over a horizontal line.

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 203851396

Date: 06-03-25