

# 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: Kira David Design 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: <u>IL</u> Country: <u>USA</u>

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: 1/5/2018

### **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: 222 JEFFERSON BLVD., STE 200

City or Town: WARWICK State: RI Zip: 02888

Name: LEGALINC CORPORATE SERVICES INC.

#### **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:

City or Town:

State:

Zip:

Country:

#### **ARTICLE X**

The mailing address for the limited liability company is:

No. and Street:

1966 W MONTROSE AVE

City or Town:

CHICAGO

State: <u>IL</u> Zip: <u>60613</u> Country: <u>USA</u>

### **ARTICLE XI**

The limited liabilty 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	<b>Individual Name</b> First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	KIRA OBENMEIER	322 TABER AVE. PROVIDENCE, RI 02906 USA

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 3 Day of July, 2025 at 4:24:53 PM by the Authorized Person.

KIRA OBENMEIER	
Form No. 450 Revised 09/07	
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# To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

KIRA DAVID DESIGN LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 05, 2018, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 2ND day of JULY A.D. 2025 .

Authentication #: 2518303596 verifiable until 07/02/2026

Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE