

Application for Registration FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

SP 1NF IE BHIS:43:13 KEC,D KIDOZ RZD

Pursuant to the provisions of RIGL 7-16- applies for a Certificate of Registration to purpose submits the following statement:	transact business in the State	ited liability company hereby of Rhode Island, and for that	(30 30 a)
1. The name of the limited liability comp	any is:		
Atelier Ten USA, 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 pro			
2. The LLC is organized under the laws	of:		
	New York		
3. The date of its organization is: 11/2	6/2002		
And the period of its duration is: CHECI	K ONE BOX ONLY		
Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the residen	t agent/office in Rhode Island i	S:	
Agent Name Capitol Corporate Ser	vices, Inc.		
Street Address (NOT a P.O. Box) 222	Jefferson Blvd Ste 200		
City/Town	State	Zip Code	
Warwick	RHODE ISLAND	02888	
5. The purpose or purposes which it proj	poses to pursue in the transact	ion of business in Rhode Island	are:
Environmental Design Consultan	tc		
city to interior besign consultan			
		Check the box to indige	le an attachment 🔲

MAIL TO:

Oivision of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri.gov JUL 16 2025

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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:					
104 W 29th Street, 8th Fl. New York, NY 10001****					
8. The mailing address for the limited liability company is:					
See #7					
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY					
Members (Owners) OR Manager(s). Complete the chart below. DO NOT complete the chart below.					
	MANAGER(S) NAME	ADDRESS			
	Paul Borchard	104 W 29th Street, 8th Floor NY, NY 10001			
	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 Certific	ate of Registration will be effec	tive: 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		Date			
Atelier Ten USA, LLC		7/8/25			
Signature of Authorized Person					
Paw Bonne					

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I. WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: ATELIER TEN USA LLC

DOS ID Number: 2839418

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING
Date of Initial Filing with DOS: 11/26/2002

Statement Status: CURRENT Statement Due Date: 11/30/2026

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on July 02, 2025 at 08:52 A.M.

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WALTER T. MOSLEY Secretary of State

BRENDAN C. HUGHES
Executive Deputy Secretary of State

Authentication Number: 100008317704 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ocorp.dos.ny.gov