RI SOS Filing Number: 202577143630 Date: 8/6/2025 11:39:00 AM



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: NJA Remodeling and Home Improvements, 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: NJ 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: 08/06/2025

ARTICLE IV

The date of its organization is: $\frac{4/6/2006}{}$

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: 47 WOOD AVE

SUITE 2

City or Town: BARRINGTON State: RI Zip: 02806

Name: REGISTERED AGENTS INC

Article VII

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

NJA REMODELING AND HOME IMPROVEMENTS IS A SERVICE PROVIDER FOR LOWES HOME

IMPROVEMENT STORES AS A KITCHEN CABINET, BATHROOM VANITIES, WINDOWS AND DOORS

INSTALLERS. WE HAVE BEEN ASKED BY LOWES TO EXPAND OUR TERRITORY COVERAGE AND

FOOTPRINT INTO RHODE ISLAND.

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: 110 MAIN STREET

SUITE 203

City or Town: SOUTH AMBOY State: NJ Zip: 08879 Country: USA

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 110 MAIN STREET

SUITE 203

City or Town: SOUTH AMBOY State: NJ Zip: 08879 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. Only 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 6 Day of August, 2025 at 11:40:47 AM by the Authorized Person.

BRIAN TIMMES

Form No. 450 Revised 09/07

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STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

NJA REMODELING AND HOME IMPROVEMENTS LIMITED LIABILITY COMPANY 0400127552

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on April 06, 2006.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

BRIAN E. TIMMES 110 MAIN STREET SUITE 203 SOUTH AMBOY, NJ 08879

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on January 23, 2025.

MEMBER

BRIAN E TIMMES

1503 Wyckoff Road

Wall Township, NJ 07727



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 24th day of July, 2025

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6166845322

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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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:

August 06, 2025 11:39 AM

Gregg M. Amore

Secretary of State

Tregs M. Coure

