



REC'D RIDOS BSD  
25 AUG 15 AM 11:25:52

# REINSTATEMENT

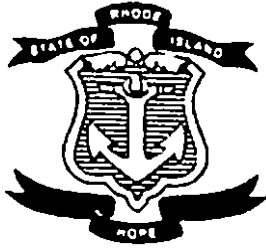
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------------|--------------------------|------------------------------------------------------------------------|----------------------------|-------------------------|----------------------------------------------------|--|--|--------------------------------------------------------------|--|--|------------------------------------------------------|--|--|---------------------------------------------------------------|--|--|---------------------------------------------------------------------------|--|--|----------------------------------------------------|--|--|-----------------------------------------------------------|--|--|
| 1. Entity ID Number:<br><b>001731453</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2. The name of the entity is:<br><b>Starboard Developer Cooperative, LLC</b> |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| 3. Date of Revocation:<br><b>09/17/2024</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4. Reason for Revocation:<br><b>Annual Report</b>                            |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| 5. Entity Type:<br><b>Limited Liability Company</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| 6. The reinstatement requirements are:<br><table><tr><td><input checked="" type="checkbox"/> Annual Reports (# of reports) <b>2</b></td><td>(report filing fee) \$ <b>50</b></td><td>Total Fees \$ <b>100</b></td></tr><tr><td><input checked="" type="checkbox"/> Penalty fees (# of years) <b>1</b></td><td>(penalty fee) \$ <b>50</b></td><td>Total Fees \$ <b>50</b></td></tr><tr><td colspan="3"><input type="checkbox"/> Replacement filing fee \$</td></tr><tr><td colspan="3"><input checked="" type="checkbox"/> LOGS (Tax Good Standing)</td></tr><tr><td colspan="3"><input type="checkbox"/> Legislative Act/Court Order</td></tr><tr><td colspan="3"><input type="checkbox"/> Change of Agent Form (filing fee) \$</td></tr><tr><td colspan="3"><input type="checkbox"/> Change of Registered Office Form - <b>NO FEE</b></td></tr><tr><td colspan="3"><input type="checkbox"/> Certificate of Correction</td></tr><tr><td colspan="3"><input type="checkbox"/> Amendment (name change required)</td></tr></table> |                                                                              | <input checked="" type="checkbox"/> Annual Reports (# of reports) <b>2</b> | (report filing fee) \$ <b>50</b> | Total Fees \$ <b>100</b> | <input checked="" type="checkbox"/> Penalty fees (# of years) <b>1</b> | (penalty fee) \$ <b>50</b> | Total Fees \$ <b>50</b> | <input type="checkbox"/> Replacement filing fee \$ |  |  | <input checked="" type="checkbox"/> LOGS (Tax Good Standing) |  |  | <input type="checkbox"/> Legislative Act/Court Order |  |  | <input type="checkbox"/> Change of Agent Form (filing fee) \$ |  |  | <input type="checkbox"/> Change of Registered Office Form - <b>NO FEE</b> |  |  | <input type="checkbox"/> Certificate of Correction |  |  | <input type="checkbox"/> Amendment (name change required) |  |  |
| <input checked="" type="checkbox"/> Annual Reports (# of reports) <b>2</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (report filing fee) \$ <b>50</b>                                             | Total Fees \$ <b>100</b>                                                   |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input checked="" type="checkbox"/> Penalty fees (# of years) <b>1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (penalty fee) \$ <b>50</b>                                                   | Total Fees \$ <b>50</b>                                                    |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Replacement filing fee \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input checked="" type="checkbox"/> LOGS (Tax Good Standing)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Legislative Act/Court Order                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Change of Agent Form (filing fee) \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Change of Registered Office Form - <b>NO FEE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Certificate of Correction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| <input type="checkbox"/> Amendment (name change required)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |
| 7. Accompanied by <b>Dissolution</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                              |                                                                            |                                  |                          |                                                                        |                            |                         |                                                    |  |  |                                                              |  |  |                                                      |  |  |                                                               |  |  |                                                                           |  |  |                                                    |  |  |                                                           |  |  |

FILED

AUG 15 2025

11:25

BY R7F8W7  
*A*



STATE OF RHODE ISLAND  
DEPARTMENT OF ADMINISTRATION  
DIVISION OF TAXATION  
ONE CAPITOL HILL  
PROVIDENCE, RI 02908

STARBOARD DEVELOPER COOPERATIVE LLC  
903 PROVIDENCE PL APT 234  
PROVIDENCE, RI 02903-7007

## LETTER OF GOOD STANDING

It appears from our records that STARBOARD DEVELOPER COOPERATIVE LLC has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. STARBOARD DEVELOPER COOPERATIVE LLC is in good standing with the Rhode Island Division of Taxation as of 06/27/2025. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above-named corporation for the purpose of:

## DISSOLUTION

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

JUSTIN HAAS  
Supervising Revenue Officer

Neena Savage  
Tax Administrator

873377480:23260195  
DLN: 10019682665