



**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: Lexi Stanley, 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:

Lexi's Nail Spa

ARTICLE III

The Limited Liability Company is organized under the laws of: State: VT 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: 09/23/2025

ARTICLE IV

The date of its organization is: 10/3/2022

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: 459 SMITHFIELD AVE

City or Town: PAWTUCKET

State: RI

Zip: 02860

Name: VERONICA GOMES

Article VII

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

NAIL SALON 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: 459 SMITHFIELD AVE

City or Town: PAWTUCKET

State: RI

Zip: 02860

Country: USA

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 94 BELLEVUE AVE

City or Town: PAWTUCKET

State: RI

Zip: 02860

Country: USA

ARTICLE XI

The limited liability company is to be managed by its X Members* or 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
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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 23 Day of September, 2025 at 12:26:07 PM by the Authorized Person.

ERICKA L. HEST SCHIFILLITI

Form No. 450
Revised 09/07

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STATE OF VERMONT
OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

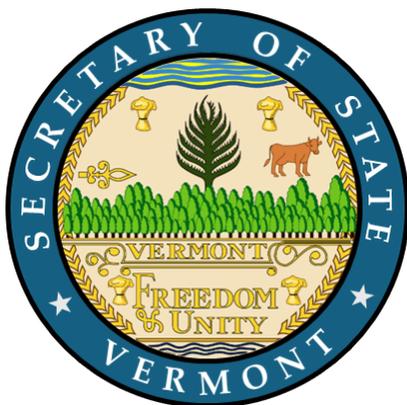
I, **SARAH COPELAND HANZAS**, Secretary of State of the state of Vermont, hereby certify in accordance with 11 V.S.A. § 4028, that on this day the records of the Office of the Secretary of State show that:

LEXI STANLEY LLC

a Vermont limited liability company

IS DULY ORGANIZED under the laws of the state of Vermont; was organized on the 3rd day of October, A.D. 2022; and that articles of termination have not been filed for this company.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal of office on this on this 18th day of September, A.D. 2025.



Sarah Copeland Hanzas
Secretary of State

Record No.: 416762
Certificate No.: C2025CT0121516

Certificate may be verified online at:
<https://bizfilings.vermont.gov/business/verifycertificate>





State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

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:

September 23, 2025 12:26 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

