RI SOS Filing Number: 202223186620 Date: 10/5/2022 12:02:00 PM



Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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Pursuant to the provisions of RIGL <u>7-16-49</u>, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

| - Formal Control of the Control of t | | | |
|--|-----------------------|----------------|--|
| The name of the limited liability company is: | | | |
| J. Gregory PEO, 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 proposes to register and transact business in Rhode Island is: | | | |
| | | | |
| 2. The LLC is organized under the laws of: Florida | | | |
| 3. The date of its organization is: 08/20/2020 | | | |
| And the period of its duration is: CHECK ONE BOX ONLY | | | |
| Perpetual (on-going) | | | |
| Date certain for dissolution | | | |
| 4. The name and address of the resident agent/office in Rhode Island is: | | | |
| Agent Name Corporate Creations Network Inc. | | | |
| Street Address (NOT a P.O. Box) 10 Dorrance Street #700 | | | |
| City/Town Providence | State RHODE ISLAND | Zip Code 02903 | |
| 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: | | | |
| Employee outsourcing, payroll and employee benefit administration | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Check the box to indicate an attachment | | | |

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 **Phone:** (401) 222-3040

Website: www.sos.ri.gov

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| 6. 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: | | | |
| 12687 SW County Road 769, Suite 4A, Lake Suzy, FL 34269 | | | |
| 8. The mailing address for the limited liability company is: | | | |
| 12687 SW County Road 769, Suite 4A, Lake Suzy, FL 34269 | | | |
| 9. Management of the Limited Liability Company: | | | |
| The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX | | | |
| By its members (If you have checked this box, DO NOT fill out the chart below) | | | |
| By one (1) or more managers (List managers below) | | | |
| MANAGER | ADDRESS | | |
| Justin P. Allbright | 12687 SW County Road 769, Suite 4A, Lake Suzy, FL 34269 | | |
| Jason A. Rubin | 12687 SW County Road 769, Suite 4A, Lake Suzy, FL 34269 | | |
| James G. Howard | 12687 SW County Road 769, Suite 4A, Lake Suzy, FL 34269 | | |
| | | | |
| 10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing. | | | |
| 11. Date when this application for Certificate of Registration will be effective: 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 | |
| Justin P. Allbright | | 10/4/2022 | |
| Signature of Authorized Person | | | |
| | | | |

State of Florida Department of State

I certify from the records of this office that J. GREGORY PEO, LLC is a limited liability company organized under the laws of the State of Florida, filed on August 20, 2020, effective August 3, 2020.

The document number of this limited liability company is L20000243315.

I further certify that said limited liability company has paid all fees due this office through December 31, 2022, that its most recent annual report was filed on April 5, 2022, and that its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Third day of October, 2022



Secretary of State

Tracking Number: 7025733075CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

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I, NELLIE M. GORBEA, 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:

October 05, 2022 12:02 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

