RI SOS Filing Number: 201748246150 Date: 8/7/2017 10:53:00 AM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

## **Application for Registration**

**FOREIGN Limited Liability Company** 

→ Filing Fee: \$150.00

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:

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purpose submits the following statement:					
The name of the limited liability company is:					
Vericred Solutions 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: Delaware					
3. The date of its organization is: 03/31/2017					
And the period of its duration is: CHECK ONLY ONE BOX					
Perpetual (on-going)					
Date certain for dissolution					
4. The name and address of the resident agent/office in Rhode Island is:					
Agent Name C T Corporation System					
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway - Suite 7A					
City/Town East Providence	State RHODE ISLAND	<sup>Zip Code</sup> 02914			
5. The 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.					
6. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:					
599 Topeka Way, Suite 700, Castle Rock, CO 80109					

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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7. The mailing address for the limited liabi	lity company is: 599 Topeka Way, Suite 700,	Castle Rock, CO 80109		
8. Management of the Limited Liability Co	mpany:			
The limited liability company is managed:				
	this box, go to Section 9. (DO NOT fill out the char	rt below.)		
By one (1) or more managers (List m.	-			
MANAGER ADDRESS				
		•		
9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.				
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX				
➤ Date received (Upon filing)				
Later effective date (Date must be no more than 30 days from the day 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		
Thomas G. Whittemore		8/3/2017		
Signature of Authorized Person				
Thomas & Whitemers DOCUMENT HERE				



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VERICRED SOLUTIONS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JULY, A.D. 2017.

You may verify this certificate online at corp.delaware.gov/authver.shtml

6365372 8300 SR# 20175446685

Authentication: 202964057

Date: 07-27-17

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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 07, 2017 10:53 AM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

