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State of Rhode Island Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 RECEIVED RECEIVED BUS SYCS I

Foreign Limited Liability Company

Application for Registration

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

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ARTICLE I

The name of the limited liability company is: RIGHIT SOLUTIONS 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.

__ Check if this company is organized in its state or country of formation as a low-profit limited fiability 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: KS 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:

ARTICLE IV

The date of its organization is: 5/19/2023

FILED

____MAY_Z_Z

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: <u>02806</u>

Name:

REGISTERED AGENTS INC

2:58pm

Article VII

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

IT CONSULTING AND DEVELOPMENT 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:

47 WOOD AVE

SUITE 2

City or Town:

BARRINGTON

State: RI

Zip: 02806

Country: <u>USA</u>

ARTICLE X

The mailing address for the limited liability company is:

No. and Street:

47 WOOD AVE

SUITE 2

City or Town:

BARRINGTON

State: RJ

Zip: 02806

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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 (Individuals hired by the members with no ownership interest).

The name and address of each manager:

| Title | Individual Name | Address |
|-------|-----------------------------|---|
| | First, Middle, Lest, 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 22 Day of May, 2023 at 2:58:18 PM by the Authorized Person.

ROBIN JONES

Form No. 450
Revised 09/07

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STATE OF KANSAS OFFICE OF SECRETARY OF STATE SCOTT SCHWAB

I, SCOTT SCHWAB, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 8215659

Entity Name: RIGHIT SOLUTIONS LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

was filed in this office on May 19, 2023, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of May 22, 2023

SCOTT SCHWAB SECRETARY OF STATE

Certificate ID: 1265544 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.

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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:

May 22, 2023 02:58 PM

Gregg M. Amore Secretary of State

Treg M. Coure

