

Application for Registration FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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Pursuant to the provisions of RIGL 7-16-4 applies for a Certificate of Registration to purpose submits the following statement:				
1. The name of the limited liability compa	iny is:			
	Rightpoint Consulting, L	LC	<u> </u>	
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes				
The name, if different, under which it pro	poses to register and transact b	ousiness in Rhode Island is	5:	
2. The LLC is organized under the laws of	of:	Illinois		
3. The date of its organization is:		04/25/2007		
And the period of its duration is: CHECK	ONE BOX ONLY		Sandayer a	
⊠ Perpetual (on-going)			# 75 A 4 7	
Date certain for dissolution	· · · · · · · · · · · · · · · · · · ·		v5 52	
4. The name and address of the resident	t agent/office in Rhode Island is	· ·		
Agent Name	Cogency Glob	pal Inc.	nac di	
Street Address (<u>NOT</u> a P.O. Box)	222 J	efferson Boulevard	peties. Or	
City/Town Warwick	State RHODE ISLAND	Zip Code	02888	
5. The purpose or purposes which it prop	poses to pursue in the transaction	on of business in Rhode Is	sland are:	
Busines	ss Process Management, IT and	d Digital Services	at a fact	
			ndicate 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 DOT 0 8 2024

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:					
29 North Wacker Drive, 5th Floor, Chicago, IL 60606					
8. The mailing address for the limited liability company is:					
29 North Wacker Drive, 5th Floor, Chicago, IL 60606					
9. Management of the Limited Liability Co	ompany: CHECK ONE BOX OF	NLY			
I IVI Mambara (Ourocca) OD I Managaría) Complete the short heleve			f.et ionabli		
	MANAGER(S) NAME	ADDRESS	Tafe or		
		Check the box to indicate an attach	ment •		
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 Certific	ate of Registration will be effec	tive: CHECK ONE BOX ONLY			
Date received (Upon filing)			ialg of		
Later effective date (Date must be no more than 90 days from the date of filing)					
Under penalty of perjury, I declare and a accompanying attachments, and that all			*********		
Type or Print Name of LLC		Date			
Rightpoint Consulting, LLC		July 23, 2024	sesinen († S		
Signature of Authorized Person	Show I		. 1.6		
President of Genpact USA, Inc., the sole member of SPC RP Investor, LLC, the sole member of Rightpoint Consulting,					

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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ABOURT TO



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RIGHTPOINT CONSULTING, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 25, 2007, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 25TH day of JULY A.D. 2024.

Authentication #: 2420702294 verifiable until 07/25/2025 Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE