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Department of State - Business Services Division

Name of Authorized Person  Sean M. McAteer (agent and counsel)			Date	<u> </u>
		e examined this report, including	any accompanyin	g schedules and
8. The Resident Agent inform	nation currently of record with t	the RI Department of State is accura	ite. Changes requir	e filing Form 642
Street Address 1332 Drftwood Drive		City Bossier City	State LA	<sup>2 ip</sup> 71111
Contact Name David Wright		Contact Title Manager		
7. Mailing Address of Limited	Liability Company and Name			
17 Brainard Street		Boston	MA	02136
6. Principal Office Address		City	State	Zip
RI		<u> </u>		
5. State of Formation	<b>-</b>	برمن ا		
54190	Commercial Innovation .			
3. NAICS Code	Bnef description of the character of business conducted in Rhode Island			
1678056	Wrightway Sytems, LLC			
1. Entity ID Number	Number 2. Exact name of the Limited Liability Company			

MAIL TO:

**Division of Business Services** 

State of Rhode Island

Annual Report for the year: Limited Liability Company → Filing period: February 1 - May 1

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov