State of Rhode Island
**Department of State - Business Services Division**

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# Application for Transfer of Authority

FOREIGN Business Corporation, Limited Partnership,
Limited Liability Company, Limited Liability Partnership or Non-Profit Corporation

Pursuant to the applicable provisions of RIGL Title 7, the undersigned duly qualified foreign entity submits the following application for the purpose of transferring its authority to conduct business in the State of Rhode Island to:

| 1. Entity ID Number: | 2. The full name of the entity filing this application is: |
|---|---|
| 135191 | Maloney Properties, Inc. |

3. The applicant is a duly qualified foreign: **(CHECK ONE BOX ONLY)**

☐ Limited Liability Company ☑ Business Corporation ☐ Non-Profit Corporation

☐ Limited Partnership ☐ Limited Liability Partnership

4. The applicant submits this application for the purpose of transferring its authority to a: **(CHECK ONE BOX ONLY)**

☑ Limited Liability Company (RIGL 7-16-52.1) ☐ Business Corporation (RIGL 7-1.2-1411.1)

☐ Non-Profit Corporation (RIGL 7-6-80.1) ☐ Limited Partnership or Limited Liability Limited Partnership (RIGL 7-13.1-1009)

☐ Limited Liability Partnership (RIGL 7-12.1-1009)

| 5. The date the applicant qualified to conduct business in Rhode Island is: | 6. The jurisdiction upon transfer of authority is: |
|---|---|
| 10/02/2003 | Massachusetts |

7. The name of the entity following the transfer of authority is:
Maloney Properties, LLC

8. The application for transfer of authority is filed as an accompanying certificate to the. **CHECK ONE BOX ONLY**

☑ Application for registration for a Limited Liabilty Company
☐ Application for certificate of authority for a Business Corporation
☐ Application for certificate of authority for a Non-Profit Corporation
☐ Statement of registration for a Limited Partnership
☐ Statement of registration for a registered Limited Liability Partnership

9. This Transfer of Authority and applicable Application/Certificate/Notice must be accompanied by a Certificate of Good Standing/Legal Existence from the current jurisdiction of the entity.

**MAIL TO:**
**Division of Business Services**
148 W. River Street, Providence, Rhode Island 02904-2615
**Phone:** (401) 222-3040
**Website:** www.sos.ri.gov

FILED
APR 17 2025
BY 2VSLG
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FORM 612 - Revised: 01/2024

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**10. TO BE COMPLETED BY THE ENTITY TRANSFERRING AUTHORITY**

*Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Transfer of Authority, including any accompanying attachments, and that all statements contained herein are true and correct and that the undersigned is authorized to sign this certificate on behalf of the entity set forth above.*

| Type or Print Name of **Limited Liability Company** | |
|---|---|
| Signature of Authorized Person | Date |
| Signature of Authorized Person | Date |

| Type or Print Name of **Corporation** | |
|---|---|
| Maloney Properties, Inc. | |
| Signature of Authorized Person<br>Janet Frazier | Date<br>04/09/2025 |
| Signature of Authorized Person | Date |

| Type or Print Name of **Partnership** | |
|---|---|
| Signature of Partner | Date |
| Signature of Partner | Date |
| Signature of Partner | Date |

| Type or Print Name of **Other Entity** | |
|---|---|
| Signature of Authorized Person | Date |
| Signature of Authorized Person | Date |

**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.**