RI SOS Filing Number: 202570455550 Date: 4/17/2025 12:15:00 PM

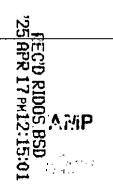


## State of Rhode Island Department of State - Business Services Division

### **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:

purpose submits the following statement.			
1. The name of the limited liability compa	ny is:		
Maloney Properties, 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:  Massachusetts			
3. The date of its organization is: February 24, 2025			
And the period of its duration is: CHECK ONE BOX ONLY			
Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the resident agent/office in Rhode Island is:			
Agent Name Registered Agent Solutions, Inc.			
Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Blvd, Suite 200			
City/Town Warwick	State RHODE ISLAND	Zip Code 02888	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
Property management services			
		Check the box to indicate 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 FILED STAIR. PRICED STAIR. PRI

<ol><li>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.</li></ol>				
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:				
27 Mica Lane, Suite 301, Wellesley, MA 02481				
8. The mailing address for the limited liability company is:				
27 Mica Lane, Suite 301, Wellesley, MA 02481				
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY				
Members (Owners)  OR  Manager(s). Complete the chart below.  DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
		<u> </u>		
Check the box to indicate an attachment				
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 Certificate of Registration will be effective: CHECK ONE BOX ONLY				
Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the date 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		
Maloney Properties, LLC		04/09/2025		
Signature of Authorized Person  Janet Frazier				



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

#### April 15, 2025

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

#### MALONEY PROPERTIES, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on February 24, 2025.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: NONE

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JANET FRAZIER, MICHAEL FRAZIER, KATHLEEN T. LUCE, DIANA KELLY, CELESTE P. VEZINA

I also certify that the names of all persons authorized to act with respect to real property listed in the most recent filing are: JANET FRAZIER, MICHAEL FRAZIER, KATHLEEN T. LUCE, DIANA KELLY, CELESTE P. VEZINA



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travis Galicin

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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:

April 17, 2025 12:15 PM

Gregg M. Amore

Tregs M. Coure

Secretary of State

