

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

## REC'D RIDOS BSD 25 JUN 25 PHI: 12:5

### **Certificate of Authority**

FOREIGN Non-Profit Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-6-74</u>, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:				
Mass General Brigham Health Plan Holding Company, Inc.				
1a. The name, if different, which it elects to use in Rhode Island is:				
*If the corporate name is not available in Rhode Island, then corporation will qualify and transact business in Rhode Island filed with this application.	set forth below the fictitious na d as stated in the "Fictitious Bu	me under which the siness Name Statement" to be		
2. It is incorporated under the laws of:  Massachusetts				
3. The date of its incorporation is: 03-03-2020				
And the period of its duration is: CHECK ONLY ONE BOX				
X Perpetual (on-going)				
Date certain for dissolution				
4. The address of its principal place of business is:				
399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145				
5. The name and address of the initial registered agent/office in Rhode Island is:				
Agent Name C T Corporation System				
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A				
City/Town East Providence	State RHODE ISLAND	Zip Code 02914		

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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





BY 7422T

6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:					
Holding Company					
Check the box to indicate an attachment					
7. The names and respective addresses of its directors and officers are:					
OFFICE	NAME	ADDRESS			
Director	A. ANTHONY JAMES	399 Revolution Drive, Suite	399 Revolution Drive, Suite 918, Somerville, MA 02145		
Director	ANNE M. WILKINS	399 Revolution Drive, Suite	399 Revolution Drive, Suite 918, Somerville, MA 02145		
Director	MICHAEL A. CURRY, ESQ.	399 Revolution Drive, Suite	399 Revolution Drive, Suite 918, Somerville, MA 02145		
President	STEVEN J. TRINGALE	399 Revolution Drive, Suite	399 Revolution Drive, Suite 918, Somerville, MA 02145		
Vice President	none				
Treasurer	NIYUM GANDIII	399 Revolution Drive, Suite	399 Revolution Drive, Suite 918, Somerville, MA 02145		
Secretary	JOHN R. HIGHAM, ESQ.	399 Revolution Drive, Suite	918, Somerville, MA 02145		
		Check the	e box to indicate an attachment X		
8. This appli-	cation must be accompanied by a <u>Certifi</u> sted within 60 days of the date of this filir	icate of Good Standing/Letter of Stat	tus from the state or country of		
Under penal	Ity of perjury, we declare and affirm that i	we have examined this Application fo	or Certificate of Authority, including orrect.		
and accompanying attachments, and that all statements contained herein are true and correctly before the statements of X President OR Vice President		Date			
STEVEN J. TRINGALE		6/17/25			
Signature of	Signature of President OR Vice President				
ملكع ا	ion J. Trugale				
Type of Print Name of Secretary OR X Assistant Secretary		Date			
DONNA M. LUKEN		6/17/25			
Signature of Secretary OR Assistant Secretary					
Jona M Da					

TWO SIGNATURES ARE REQUIRED

#7 The names and respective addresses of its directors and officers are (continued):

Title 🚜 🚣	Individual Name	Address A Line To The Address
ASSISTANT SECRETARY	DONNA M. LUKEN	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	LESLEE L. KILEY	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	ANTONIA G. MCGUIRE, R.N.	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	CLARITZA N. ABREAU	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	RAUL MEDINA GOMEZ	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	STEVEN J. TRINGALE	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	RICHARD E. HOLBROOK	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA
DIRECTOR	STEPHANIE F BROWNE	399 REVOLUTION DRIVE, SUITE 918 SOMERVILLE, MA 02145 USA



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

May 29, 2025

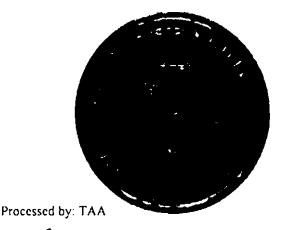
#### TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office

### MASS GENERAL BRIGHAM HEALTH PLAN HOLDING COMPANY, INC.

is a domestic corporation organized on March 3, 2020.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



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 Tranino Gallein