RI SOS Filing Number: 202577464780 Date: 8/7/2025 12:02:00 PM



# State of Rhode Island Office of the Secretary of State

Fee: \$150.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

AUG 07 2025 conline filling BY UCS 1333141

# Foreign Limited Liability Company Application for Registration

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

#### **ARTICLE 1**

The name of the limited liability company is: WRIGHT CHOICE PROPERTIES, LLC

Enter your name exactly as it appears in your state. If your name includes an entity ending other than LLC or Limited Liability Company, complete Article II. The elected name in RI must include the entity ending LLC or Limited Liability Company.

#### **ARTICLE II**

The name, if different, under which it proposes to register and transact business in Rhode Island is:

# **ARTICLE III**

The Limited Liability Company is organized under the laws of: State: MA Country: US

The date this Application for Registration is to become effective, not prior to, nor more than 90 days after the filing of this Application for Registration.

Later Effective Date: 08/07/2025

## **ARTICLE IV**

The date of its organization is: 8/20/2024

# ARTICLE V

The period of its duration is:  $\underline{X}$  Perpetual

## **ARTICLE VI**

The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island: •

No. and Street:

**53 AYR STREET** 

City or Town:

Name:

CENTRAL FALLS

**VERONICA WRIGHT** 

State: RI Zip: 02863

Article VII

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

# REAL ESTATE INVESTING

# **ARTICLE VIII**

The Rhode Island 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.

#### **ARTICLE IX**

The address of the office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized:

No. and Street:

53 AYER ST

City or Town:

CENTRAL FALLS

State: RI

Zip: <u>02863</u>

Country: US

#### **ARTICLE X**

The mailing address for the limited liability company is:

No. and Street:

**10 OAK STREET** 

City or Town:

**FOXBORO** 

State: MA

Zip: 02035

Country: US

# **ARTICLE XI**

The limited liabilty company is to be managed by its \_\_\_ Members\* or \_\_\_X Managers (check one)

\* If you checked to be managed by your MEMBERS (the owners) DO NOT complete the following section. Only complete the following section if you checked to be managed by MANAGERS.

The name and address of each manager:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zlp Code, Country
MANAGER	DEREK STEPHEN WRIGHT	10 OAK ST FOXBOROUGH, MA 02035 USA
MANAGER	VERONICA ELIZABETH WRIGHT	10 OAK ST FOXBOROUGH, MA 02035 USA

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 7 Day of August, 2025 at 12:02:58 PM by the Authorized Person.  VERONICA WRIGHT	
Form No. 450 Revised 09/07	
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Commonwalth

# The Commonwealth of Hassachusetts. Secretary of the Commonwealth. State House, Boston, Massachuseus 02188

June 17, 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

# WRIGHT CHOICE PROPERTIES, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on August 20, 2024.

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: DEREK STEPHEN WRIGHT, VERONICA ELIZABETH WRIGHT

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: DEREK STEPHEN WRIGHT, VERONICA ELIZABETH WRIGHT

I also certify that the names of all persons authorized to act with respect to real property listed in the most recent filing are: NONE



Processed by, mag

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In resulmony of which,

I have bereumto affixed the

Great Seal of the Commonwealth

on the date first above written,

Secretary of the Commonwealth

William Manino Galecin

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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:

August 07, 2025 12:02 PM

Gregg M. Amore Secretary of State

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