### Filing and License Fee: \$310.00 minimum



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

#### **BUSINESS CORPORATION**

#### APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign

TERRETARY OF STATE

corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement: Hakuna, Inc. The name of the corporation is 1. It is incorporated under the laws of 2. The name, if different, which it elects to use in Rhode Island is: 3. (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application: The date of its incorporation is \_\_\_\_\_ and the period of its duration is The address of its principal office is \_\_\_\_\_ Madison Avenue, Fl 2, New York, NY 10016 5. The address of its proposed registered office in Rhode Island is \_\_\_\_\_ 450 Veterans Memorial Parkway Suite 7A (Street Address, not P.O. Box) RI 02914 Fast Providence and the name of its proposed registered agent in Rhode Island at (City/Town) **C T Corporation System** (Name of Agent) The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Home care services (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated). Name <u>Address</u> 79 Madison Ave, Fl 2, New York, NY 10016 Kevin Liu Director Director Director

Form No. 150 Revised: 06/11

Director

BY/LL 253981

		<u>Name</u>			<u>Address</u>	
	Pre	esident				
	Vic	e President	-			
	Treasurer					
	Sec	cretary				
9.	The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value and series, if any, within a class, is:					
	Number of Shares Class			<u>Series</u>	Par Value or Statement that Shares are without Par Value	
	10,000,000		Common	CS-001	\$0.0001	
	— (a)	50,000	= An estimat	te of the value of all pr	roperty to be owned by the corporation for the	
	following year, wherever located.  10.000				· · · · · · · · · · · · · · · · · · ·	
	(b) \$ = An estimate of the value of the corporation's property to be located within Rho Island during the following year.  20					
	(c)% = An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. {divide (b) by (a) and multiply by 100 to obtain the percentage}					
11.	(a)	\$ 500,000			of business to be transacted by the corporation	
	during the following year.					
	(b) \$\frac{50,000}{\text{or from places of business in Rhode Island during the following year.}} = An estimate of the gross amount of business to be transacted by the corporation and the following year.					
	10					
	(c)% = An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year. {divide (b) by (a) and multiply by 100 to obtain the percentage}					
12.		s application is accompanied s of which it is incorporated.	by a certificate of Good	Standing issued by the	proper officer of the state or country under the	
13.	This	s Application for Certificate of	Authority shall be effective	e upon filing unless a sp	ecified date is provided which shall be no later	
	thar	n the 90th day after the date o	of this filing	,		
				Application for Certific	y, I declare and affirm that I have examined this ate of Authority, including any accompanying all statements contained herein are true and	
_		10. 21 201		/		
Date: 3 2015			_	Signature of	Authorized Officer of the Corporation	
				_		
				Type or Pi	int Name of Authorized Officer	

# Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HAKUNA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF JUNE, A.D. 2015.

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150638024

AUTHENTYCATION: 2469913

Jeffrey W. Bullock, Secretary of State

DATE: 06-16-15

You may verify this certificate online at corp.delaware.gov/authver.shtml

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

