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ID Number: _____

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

2015 OCT - 1 AM 10:48 RECEIVED SECRETARY OF STATE CORPORATIONS DIV

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 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:

1. The name of the corporation is **LEXA ENTERPRISES, INC.**

2. It is incorporated under the laws of **STATE OF GEORGIA**

3. The name, if different, which it elects to use in Rhode Island is:

   (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:*

4. The date of its incorporation is 3/23/11 and the period of its duration is PERPETUAL

5. The address of its principal office in the state or country under the laws of which it is incorporated is

   45 S CLIFF DR, NARRAGANSETT, RI 02882

6. The address of its proposed registered office in Rhode Island is **45 S CLIFF DR**
   (Street Address, **not** P.O. Box)
   NARRAGANSETT, RI **02882** and the name of its proposed registered agent in Rhode Island at
   (City/Town) (Zip Code)
   that address is **CHRISTOPHER YUN**
   (Name of Agent)

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:
   CLINICAL DEVELOPMENT CONSULTING

8. (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	*Address*
Director	CHRIS YUN	45 S CLIFF DR NARRAGANSETT RI 02882
Director	LISA RODIER	45 S CLIFF DR NARRAGANSETT RI 02882
Director		
Director		

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Form No. 150
Revised: 12/05

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

	Name	*Address*
President	CHRISTOPHER YUN	45 S CLIFF DR, NARRAGANSETT RI 02882
Vice President		
Treasurer		
Secretary	LISA RODIER	45 S CLIFF DR, NARRAGANSETT RI 02882

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	Series	Par Value or Statement that Shares are without Par Value
300	CAPITAL		$1.00

10. (a) An estimate of the value of all property to be owned by the corporation for the following year, wherever located, is $ 850.

(b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year is $ 850.

(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, is 100 %. [*divide (b) by (a) and multiply by 100 to obtain the percentage*].

11. (a) An estimate of the gross amount of business to be transacted by the corporation during the following year is $ 335,000.

(b) An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year is $ 335,000.

(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 is 100 % [*divide (b) by (a) and multiply by 100 to obtain the percentage*].

12. This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.

13. This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 9/28/15

Christopher S. Yun
Signature of Authorized Officer of the Corporation

CHRISTOPHER YUN
Type or Print Name of Authorized Officer

Control Number : 11025236

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF CERTIFIED COPY

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents filed with the Corporations Division of the Office of the Secretary of State of Georgia under the name of

LEXA ENTERPRISES INC

a Domestic Profit Corporation

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

Docket Number	: 102794
Date Inc/Auth/Filed	: 03/23/2011
Jurisdiction	: Georgia
Print Date	: 10/4/2015
Form Number	: 215

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Brian P. Kemp
Secretary of State

State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

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:

October 09, 2015 10:10 AM

Nellie M. Gorbea
Secretary of State

126377-2-1061897