(Annual)

State of Rhode Island and Providence Plantations

### **Department of State - Business Services Division**

## **Certificate of Authority**

**FOREIGN Corporation** 

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1.2-1405</u>, 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:

RECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE OF STATE

for that purpose submits the following statement:					
The name of the corporation is:					
360Medlink Inc					
2. It is incorporated under the laws of: Canada					
3. The name, if different, which it elects to use in Rt	node Island is:	, , , , , , , , , , , , , , , , , , , ,			
(a) If the name of the corporation in its jurisdiction o "incorporated", or "limited," or an abbreviation there above corporate endings for use in Rhode Island:	of incorporation does not contain of, then list the name of the corp	the word "corporation", "company", oration with the addition of one of the			
(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: July 23rd, 2010					
And the period of its duration is: CHECK ONLY ONE BOX  Perpetual (on-going)					
Date certain for dissolution					
5. The address of its principal office is:					
1000 De La Gauchetiere West, Suite 2400. Montreal. Quebec. H3B-4W5. Canada					
6. The name and address of the initial registered agent/office of in Rhode Island:					
Agent Name Corporate Creations Network INc					
Street Address (NOT a P.O. Box) 10 Dorrance Street #700					
City/Town Providence	State RHODE ISLAND	Zip Code <b>02903</b>			

#### 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 10119

AUG 2 2 2016

By \$7381794

FORM 150 - Revised: 05/2016

7 The purpose or pur	- case which it		· - tnontion	et et en
360Medlink will service product TAVIE. TAVIE- treatment managemen	ice the EOHHS E-HIV is a virtua ent and adhere	S (Executive Office of Hual nurse platform clinicence. The platform has	Health and Hu lically validated s been tested i	of business in Rhode Island are: uman Resources) with its main health ed for HIV patients, patient engagement, in randomized trials with patients living with
8. (a) The names and restate or country of which	espective addr	resses of its directors (o rated):	optional, unless	s directors are required under the laws of the
NAME				ADDRESS
Jean-Manasse Theage	,ene	2174 Du Boree. Mon	ntreal. Qc. Car	nada. H4R-0K2
Alberto Navas Roch		599 Boul. Beaconsfi	ield. QC. Cana	ada. H9W 5T2
β (h) The names and r	respective add	reseas of its principal of	"" (mandat	Check the box to indicate an attachment.  tory if directors are not required under the laws
of the state or country o	of which it is inc	ncorporated):	/ICCIS (mana	ory it directors are not required under the laws
OFFICE		NAME		ADDRESS
PRESIDENT	Jean-Manas	ssé Theagene	2174 Du Bo	oree. Montreal. Qc. Canada. H4R-0K2
VICE PRESIDENT	Alberto	Navas Rock	599 Boul. B	Beaconsfield. QC. Canada. H9W 5T2
TREASURER				
SECRETARY	Michele Sajo	jous Theagene	2174 Du Bo	oree. Montreal. Qc. Canada. H4R-0K2.
				Check the box to indicate an attachment.
<ol><li>The aggregate number par value, and series, if</li></ol>	er of shares wr f any, within a c	nich it has authority to is class, is:	ssue; itemized	by classes, par value of shares, shares without
NUMBER OF SHARES	CLAS		SERIES	PAR VALUE OR STATE NO PAR VALUE
1000	A	A		\$1000
I				<del></del>
10. (a) Estimate, in doll owned by the corporatio located:  \$_65,000			to be located w	n dollars, the value of the corporation's property within Rhode Island during the following year:
within this state during the	the following ye	ear bears to the value of	of all property of	ne property of the corporation to be located of the corporation to be owned during the by 100 to obtain the percentage.

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.
\$_ <b>2,000,000</b>	\$
centage.	imount of business to be transacted by the corporation at or givear compared to the gross amount thereof which will be in the Divide (11b) by (11a) and multiply by 100 to obtain the per-
15 %	
12. This application must be accompanied by a Certificate o the state or country under the laws of which it is incorporated	f Good Standing/Letter of Status issued by the proper officer of d that is dated within 60 days of the filing of this document.
13. Date when the Certificate of Authority will be effective: C	HECK ONLY ONE BOX
✓ Date received (Upon filing)	
Later effective date (Date must be no more than 90 day	s from the day of filing)
Under penalty of perjury, I declare and affirm that I have exa accompanying attachments, and that all statements contained	mined this Application for Certificate of Authority, including any ed herein are true and correct.
Type or Print Name of Authorized Officer	Date
Jean-Manassé Theagene	August 19th, 2016
Signature of Authorized Officer of the Corporation	
SIGN DOCK	JMENT HERE



#### Attestation de Revenu Québec

Cette attestation est délivrée à :

360MEDLINK INC. 1000, RUE DE LA GAUCHETIERE O PORTE 2400 MONTREAL (QUEBEC) H3B 4W5

Numéro d'entreprise du Québec (NEQ) : 1166774894

SECRETARY OF STATE CORPORATIONS DIV

Elle atteste que l'entreprise désignée ci-dessus répond, à la date de délivrance, aux conditions suivantes :

- Elle a produit les déclarations et les rapports exigés en vertu des lois fiscales québécoises.
- Elle n'a pas de compte en souffrance à l'endroit du ministre du Revenu du Québec ou, si elle a un compte en souffrance, elle se trouve dans l'une ou l'autre des situations suivantes :
  - le recouvrement de ses dettes a été légalement suspendu;
  - des dispositions ont été convenues avec elle pour assurer le paiement de ses dettes, et elle n'est pas en défaut à cet égard.

Cette attestation est délivrée sous réserve des droits du ministre du Revenu, qui peut notamment procéder à toute vérification, à toute inspection, à tout examen ou à toute enquête. Le ministre peut aussi établir toute détermination, toute imposition et toute cotisation. Enfin, il peut rendre toute décision et recouvrer tout montant relativement à l'entreprise désignée.

Numéro de l'attestation: 012182-AWWW-0315189

Date et heure de délivrance de l'attestation : 17 août 2016 à 11 h 34 min 11 s

Date de fin de la période de validité de l'attestation : 31 janvier 2017

Vous pouvez vérifier l'authenticité de cette attestation sur le site Internet de Revenu Québec, à l'adresse **www.revenuquebec.ca**.

Assurez-vous que l'attestation a été délivrée dans le délai prévu par la législation en vigueur.



# Attestation de Revenu Québec [Revenu Québec Certificate]

This certificate is issued to:

360MEDLINK INC. 1000 DE LA GAUCHETIERE ST. W SUITE 2400 MONTREAL (QUEBEC) H3B 4W5

Quebec Enterprise Number (NEQ): 1166774894

It certifies that, at the issuance date, the company designated above meets the following conditions:

- It has produced the returns and reports required by Quebec tax laws.
- It has no overdue accounts payable to the Minister of Revenue of Quebec or, if it does, one of the following circumstances applies:
  - Collection of its debts has been legally suspended.
  - An agreement has been reached with it to ensure payment of its debts, and it is not in default in this regard.

This certificate is issued subject to the rights of the Minister of Revenue, who may proceed with any verification, inspection, examination or investigation. The Minister may also establish any determination or assessment. Finally, he may make any ruling and recover any amount in relation to the designated company.

Certificate number: 012182-AWWW-0315189

Date and time the certificate was issued: August 17, 2016 at 11:34:11 a.m.

Certificate validity period expiration date: January 31, 2017

You may verify the authenticity of this certificate on the Revenu Québec website at www.revenuquebec.ca.

Please ensure that the certificate was issued within the time frame provided for under current legislation.

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

