



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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BUS. SVCS. DIV.
2016 DEC 07 PM 2:55

Certificate of Authority

FOREIGN Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, 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: Lenovo Connect (United States) Inc.		
2. It is incorporated under the laws of: Delaware		
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: 11/07/2016		
And the period of its duration is: CHECK ONLY ONE BOX <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is: 1009 Think Place, Morrisville, NC 27560		
6. The name and address of the initial registered agent/office of in Rhode Island:		
Agent Name C T Corporation System		
Street Address (<u>NOT</u> 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


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FORM 150 - Revised: 05/2016

<p>7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Wireless telecommunication reseller Notwithstanding the foregoing, the purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized to do business under the laws of its jurisdiction of incorporation.</p>																							
<p>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):</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 65%;">ADDRESS</th> </tr> </thead> <tbody> <tr> <td>Kurt Cranor</td> <td>1009 Think Place, Morrisville, NC 27560</td> </tr> <tr> <td>John Stanley</td> <td>1009 Think Place, Morrisville, NC 27560</td> </tr> <tr> <td>Thomas S Ottman</td> <td>1009 Think Place, Morrisville, NC 27560</td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table> <p style="text-align: right;">Check the box to indicate an attachment. <input type="checkbox"/></p>				NAME	ADDRESS	Kurt Cranor	1009 Think Place, Morrisville, NC 27560	John Stanley	1009 Think Place, Morrisville, NC 27560	Thomas S Ottman	1009 Think Place, Morrisville, NC 27560												
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<p>8. (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):</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">OFFICE</th> <th style="width: 35%;">NAME</th> <th style="width: 50%;">ADDRESS</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>Kurt Cranor</td> <td>1009 Think Place, Morrisville, NC 27560</td> </tr> <tr> <td>VICE PRESIDENT</td> <td>John Stanley</td> <td>1009 Think Place, Morrisville, NC 27560</td> </tr> <tr> <td>TREASURER</td> <td> </td> <td> </td> </tr> <tr> <td>SECRETARY</td> <td> </td> <td> </td> </tr> </tbody> </table> <p style="text-align: right;">Check the box to indicate an attachment. <input type="checkbox"/></p>				OFFICE	NAME	ADDRESS	PRESIDENT	Kurt Cranor	1009 Think Place, Morrisville, NC 27560	VICE PRESIDENT	John Stanley	1009 Think Place, Morrisville, NC 27560	TREASURER			SECRETARY							
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SECRETARY																							
<p>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:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">NUMBER OF SHARES</th> <th style="width: 20%;">CLASS</th> <th style="width: 20%;">SERIES</th> <th style="width: 40%;">PAR VALUE OR STATE NO PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>1,000</td> <td>Common</td> <td> </td> <td>\$0.0100</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE	1,000	Common		\$0.0100												
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<p>10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever located: \$ 0.0000</p>		<p>(b) Estimate, in dollars, the value of the corporation's property to be located within Rhode Island during the following year: \$ 0.0000</p>																					
<p>(c) Estimate, as a percentage, 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. <i>Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage.</i> 0 %</p>																							

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year. <div style="text-align: right;">\$ 0.0000 _____</div>	(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. <div style="text-align: right;">\$ 0.0000 _____</div>
(c) Estimate, as a percentage , the proportion 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 compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.</i> <div style="text-align: right;">0 %</div>	
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.	
13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX	
<input checked="checked" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the day of filing) _____	
<i>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.</i>	
Type or Print Name of Authorized Officer Kurt Cranor, President	Date 11/29/2016
Signature of Authorized Officer of the Corporation 	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 150 - Revised: 05/2016

Delaware

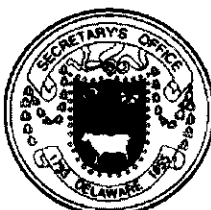
The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LENOVO CONNECT (UNITED STATES) 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 SECOND DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



6206785 8300

SR# 20166892377

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203439856

Date: 12-02-16



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:

Nellie M. Gorbea
Secretary of State

