## **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:

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for that purpose submits the following statement:		L				
The name of the corporation is:						
Jobletics, Inc.						
It is incorporated under the laws of:     Delawar	е					
3. The name, if different, which it elects to use in Rhode 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:	f incorporation does not contain of, then list the name of the corp	the word "corporation", "company", poration 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 16, 2015						
And the period of its duration is: CHECK ONLY ON Perpetual (on-going)	E BOX					
Date certain for dissolution	Date certain for dissolution					
5. The address of its principal office is:						
50 Station Landing, #505, Medford, MA 02155						
6. The name and address of the initial registered agent/office of in Rhode Island:						
Agent Name Corporation Service Company						
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200						
City/Town Warwick	State RHODE ISLAND	Zip Code <b>02888</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 HILED

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A.A. 12.54pm

7. The purpose or purp	oses which it r	proposes to pursue in t'	7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
To provide employers in the food service and hospitality industry with on-demand staff for shift work through a							
mobile application	III MIN INTEREST.	SITIOU GITA HOOPIGE,	industry with c.	1-demand stan for since work unough a			
(a) The names and restate or country of which	espective addr	resses of its directors (r	optional, unless di	irectors are required under the laws of the			
NAME	U If is incorbore	T T T T T T T T T T T T T T T T T T T	Δ!	DDRESS			
Rahul Sharma	<u>, , , , , , , , , , , , , , , , , , , </u>	50 Station Landing,	50 Station Landing, #505, Medford, MA 02155				
			·				
				Check the box to indicate an attachment.			
8. (b) The names and re of the state or country o	espective address of which it is inc	esses of its principal of corporated):	ficers (mandatory	if directors are not required under the laws			
OFFICE		NAME		ADDRESS			
PRESIDENT	Rahul Sharm	na	50 Station Lan	nding, #505, Medford, MA 02155			
VICE PRESIDENT	n/a		n/a				
TREASURER	Rahul Sharm	na	50 Station Lan	nding, #505, Medford, MA 02155			
SECRETARY	Rahul Sharm	na	50 Station Lan	nding, #505, Medford, MA 02155			
				Check the box to indicate an attachment.			
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	CLAS	js	SERIES	PAR VALUE OR STATE NO PAR VALUE			
1,000,000	Common			\$.001			
ı							
				•			
10. (a) Estimate, in doll	lars, the value		(b) Estimate, in do	ollars, the value of the corporation's property			
owned by the corporation located:	n for the follow	ring year, wherever	to be located with	nin Rhode Island during the following year:			
\$		_	\$ <u>0</u>	1			
within this state during th	he following yea	ear bears to the value of	of all property of the	roperty of the corporation to be located are corporation to be owned during the 00 to obtain the percentage.			
0 %				to to obtain the personage.			

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.			
\$	\$			
(c) Estimate, <b>as a percentage</b> , 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> .  12%				
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				
✓ Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the day of 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.				
Type or Print Name of Authorized Officer	Date			
Rahul Sharma	5/23/2017			
Signature of Authorized Officer of the Corporation	Zul E			

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JOBLETICS 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 TWENTY-FIFTH DAY OF MAY, A.D. 2017.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JOBLETICS INC."

WAS INCORPORATED ON THE SIXTEENTH DAY OF JULY, A.D. 2015.

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

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Authentication

5785972 8300 SR# 20174052432

Authentication: 202600583

Date: 05-25-17