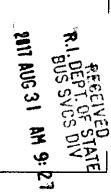


State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov



Application for Certificate of Authority Foreign Business Corporation

Filing and License 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:					
AXION BUSINESS TECHNOLOGIES TIV.					
2. It is incorporated under the laws of:	DELAWARE				
3. The name, if different, which it elects to use in Rhode Island is:					
	corporation does not contain the word "corporation", "company", then list the name of the corporation with the addition of one of				
(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:	12/29/2015				
And the period of its duration is: CHECK ONLY ONE E ✓ Perpetual (on-going)	зох				
Date certain for dissolution 12/29/2015					
5. The address of its principal office is:					
3874 HIGHLAND PARK NW					

AUG 31 2017

By 186 476 42

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6. The name and add	ress of the initial m	anistered egent/offic	e of in Phode Island	4.	
Agent Name	ERT FERLAND		e of in range island		
Street Address (<u>NOT</u>	a P.O. Box) 832	DYER AVE			
City/Town CRANSTON		State RH	ODE ISLAND	Zip Code 02920	
7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:					
SALES AND SER	VICE OF OFF	ICE EQUIPMEN	T AND TECHNO	PLOGY	
8. (a) The names and state or country of which			optional, unless dire	ctors are required under the laws of the	
NAME			ADDRESS		
			Chec	k the box to indicate an attachment.	
8. (b) The names and r laws of the state or cou			ficers (mandatory if	directors are not required under the	
OFFICE		IAME	ADDRESS		
PRESIDENT	AUSTIN VAN	ICHIERI	3874 HIGHLAND PARK NW NORTH CANTO		
VICE PRESIDENT	YVONNE BROWN		3874 HIGHLAND PARK NW NORTH CANTO		
TREASURER					
SECRETARY	MICHAEL BE	RIGNER	3874 HIGHLA	ND PARK NW NORTH CANTO	
			Check	the box to indicate an attachment.	
9. The aggregate numb without par value, and s				asses, par value of shares, shares	
NUMBER OF SHARES	CLASS	SE	RIES	PAR VALUE OR STATE NO PAR VALUE	
1000	1000 COMMON			0.0001	
			•		
	<u></u>				

Form No. 150 Revised: 2016

10. (a) Estimate, in dollars, the value of all proplocated:	erty to be owned by the corporation for the fo	pliowing year, wherever			
\$_200,000.00					
(b) Estimate, in dollars, the value of the corporative year:	on's property to be located within Rhode Isla	nd during the following			
\$					
(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. Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage.					
93%					
11. (a) Estimate, in dollars, the gross amount of bu	usiness to be transacted by the corporation du	iring the following year.			
\$_10,000,000.00					
(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.					
\$_7,500,000.00	•				
(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. Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.					
<u>75</u> %					
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.					
Signature of Authorized Officer of the Corporation	Type or Print Name of Authorized Officer	Date			
1 Min and the service	YVONNE BROWN	5/17/2017			

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.

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "AXION BUSINESS TECHNOLOGIES,

INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT

HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS

OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2015, AT 2:29 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "IMAGE SOURCE,
INC." TO "AXION BUSINESS TECHNOLOGIES, INC.", FILED THE FOURTEENTH
DAY OF JUNE, A.D. 2016, AT 10:11 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID CORPORATION, "AXION BUSINESS TECHNOLOGIES, INC.".

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



Authentication, 203057210

Date: 08-14-17

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SR# 20175718276

Page 2



AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AXION BUSINESS TECHNOLOGIES, INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2015.

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

Authentication 203057216

Date: 08-14-17