

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIVState of Rhode Island and Providence Plantations
Department of State - Business Services Division

2020 FEB 21 P 12:27

Application for Certificate of Authority

FOREIGN Business 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:		
M-Mover Holdings USA, 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:		
July 7, 2017		
And the period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is:		
8041-J Arrowridge Blvd. Charlotte, NC 28273		
6. The name and address of the initial registered agent/office in Rhode Island:		
Agent Name		
COGENCY GLOBAL INC.		
Street Address (NOT a P.O. Box)		
222 Jefferson Boulevard		
City/Town	State	Zip Code
Warwick	RHODE ISLAND	02888

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

FEB 21 2020

B. 4SR8C

12:27

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

Material handling equipment supplier

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
Andrew Delve	8041-J Arrowridge Blvd. Charlotte, NC 28273
Richard Holmes	8041-J Arrowridge Blvd. Charlotte, NC 28273
Emma Lindsay	8041-J Arrowridge Blvd. Charlotte, NC 28273

Check the box to indicate an attachment ☐

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):

OFFICE	NAME	ADDRESS
PRESIDENT	Hugh Freer	8041-J Arrowridge Blvd. Charlotte, NC 28273
VICE PRESIDENT	Andrew Owen	8041-J Arrowridge Blvd. Charlotte, NC 28273
TREASURER	James Jones	8041-J Arrowridge Blvd. Charlotte, NC 28273
SECRETARY	James Jones	8041-J Arrowridge Blvd. Charlotte, NC 28273

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	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
5000	Common		\$1.00

10. An estimate, 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. (Note: Percentage obtained from worksheet.)

0 (zero) %

11. An estimate, as a percentage, of 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: Percentage obtained from worksheet.)

2 %

12. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of this filing.	
13. Date when the Certificate of Authority will be effective: CHECK ONE BOX ONLY	
<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 date 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
HUGH FREER - PRESIDENT	02/20/2020
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.

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "M-MOVER HOLDINGS USA 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-FIRST DAY OF FEBRUARY, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M-MOVER HOLDINGS USA INC." WAS INCORPORATED ON THE SEVENTH DAY OF JULY, A.D. 2017.

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

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2020 FEB 21 P 12:27




Jeffrey W. Bullock, Secretary of State

6470883 8300

SR# 20201348263

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

Authentication: 202433404

Date: 02-21-20



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:

February 21, 2020 12:27 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

