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State of Rhode Island Department of State - Bu	siness Services Division	RECE IVED R.I. DEPT. DF STATE BUS SVCS DIV
Application for Certificate of FOREIGN Business Corporation	of Authority	2021 JAN 21 A 10: 44 SIAWP
→ Filing Fee: \$310.00 minimum		FCR SECRETARY OF STATE USE ONLY
	-1405, the undersigned foreign corporation hansact business in the State of Rhode Island atement:	
1. The name of the corporation is:		
Devo Technology, Inc.		
2. It is incorporated under the laws of:	Delaware	
	to use in Rhode Island is:	
"incorporated", or "limited," or an abbreve above corporate endings for use in Rho(b) If the corporate name is not available	jurisdiction of incorporation does not contain viation thereof, then list the name of the corp ode Island: le in Rhode Island, then set forth below the fi	ocration with the addition of one of the ictitious name under which the
 (a) If the name of the corporation in its j "incorporated", or "limited," or an abbrev above corporate endings for use in Rho (b) If the corporate name is not available corporation will qualify and transact bus filed with this application: 	jurisdiction of incorporation does not contain viation thereof, then list the name of the corp ode Island: le in Rhode Island, then set forth below the fi siness in Rhode Island as stated in the "Fictit	ocration with the addition of one of the ictitious name under which the
 (a) If the name of the corporation in its j "incorporated", or "limited," or an abbrev above corporate endings for use in Rho (b) If the corporate name is not available corporation will qualify and transact bus filed with this application: 4. The date of its incorporation is: And the period of its duration is: CHEC 	jurisdiction of incorporation does not contain viation thereof, then list the name of the corp ode Island: le in Rhode Island, then set forth below the fi siness in Rhode Island as stated in the "Fictit	ocration with the addition of one of the ictitious name under which the
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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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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Data analysis and data protection.

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):

ADDRESS	
Please see attached document, "Devo Technology, Inc. Director List"	

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		Please see attached document, "Devo Technology, Inc. Officer List
VICE PRESIDENT		
TREASURER		
SECRETARY		

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
3,000	Common		\$0.0 1
		<u>-</u>	
 ;	·	<u></u>	

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.*)

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.*)

0 %

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 This application must be accompanied by a <u>Certificate of Goo</u> formation dated within 60 days of the date of this filing. 	od Standing/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective: CHEC	K ONE BOX ONLY
Date received (Upon filing)	
Later effective date (Date must be no more than 90 days from	m the date of filing)
Under penalty of perjury, I declare and affirm that I have examine accompanying attachments, and that all statements contained he	d this Application for Certificate of Authority, including any prein are true and correct.
Type or Print Name of Authorized Officer	Date
Marc van Zadelhoff	01/12/2021
Signature of Authorized Officer of the Corporation	
Processing of the second secon	

Devo Technology, Inc. Director List

Name: Marc van Zadelhoff Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140

Name: Pedro Castillo Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140

Devo Technology, Inc. Officer List

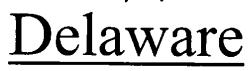
Name: Marc van Zadelhoff Office: Chief Executive Officer Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140

Name: Pedro Castillo Office: Chief Technology Officer Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140

Name: Matthew Thomas Office: Chief Revenue Officer Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140

Name: Dmitri Vlachos Office: Chief Marketing Officer Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140

Name: Frederick Wilmot Office: Chief Information Security Officer Address: 150 Cambridge Park Drive, Suite 702 City: Cambridge State: MA Zip Code: 02140



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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DEVO TECHNOLOGY, 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-FOURTH DAY OF NOVEMBER, 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 "DEVO TECHNOLOGY, INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 2015.

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



Authentication: 204152567 Date: 11-24-20

5755721 8300 SR# 20208422963 You may verify this certificate online at corp.delaware.gov/authver.shtml State of Rhode Island 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,

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:

January 21, 2021 10:44 AM

Tulli U. Hole

Nellie M. Gorbea Secretary of State

