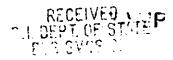


## Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00



Pursuant to the provisions of RIGL <u>7-16-49</u>, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the Country of th applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement: 1. The name of the limited liability company is: WNS BPM AMERICAS LLC No X Is this company organized in its state or country of formation as a low-profit limited liability company? Yes l The name, if different, under which it proposes to register and transact business in Rhode Island is: 2. The LLC is organized under the laws of: Delaware 3. The date of its organization is: 03/03/2023 And the period of its duration is: CHECK ONE BOX ONLY Perpetual (on-going) Date certain for dissolution 4. The name and address of the resident agent/office in Rhode Island is: Agent Name CT Corporation System Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A Zip Code State City/Town 02914 RHODE ISLAND East Providence 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: To provide mortgage and debt collection services Check the box to indicate an attachment L

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 1:53

APR 1 0 2023

BY ML RCEF

6. The RI Department of State is appointed any time, there is no resident agent or if the diligence.	d the agent of the foreign limited liability company for ne resident agent cannot be found or served followin	or service of process if, at g the exercise of reasonable	
7. The address of the office required to be if not so required, of the principal office of	maintained in the state or country of its organization the foreign limited liability company is:	n by the laws of that state or,	
1209 Orange Street, Wilmington, DE 19801			
8. The mailing address for the limited liabil	lity company is:		
1209 Orange Street, Wilmington, DE 19801			
9. Management of the Limited Liability Co	mpany:		
The Limited Liability Company is to be ma	naged by: CHECK ONLY ONE BOX		
By its members (If you have checked	this box, DO NOT fill out the chart below)	,	
By one (1) or more managers (List m	anagers below)		
MANAGER	ADDRESS		
SEE ATTACHED			
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.			
• · · · · · · · · · · · · · · · · · · ·	ate of Registration will be effective: CHECK ONE BO	OX ONLY	
∑ Date received (Upon filing)			
	o more than 90 days from the date of filing)		
Under penalty of perjury, I declare and aff accompanying attachments, and that all s	firm that I have examined this Application for Registr statements contained herein are true and correct.	ration, including any	
Type or Print Name of LLC		Date	
WNS BPM AMERICAS LLC		03/24/2023	
	dra Goyal Orreson		

## **WNS**

Resident address of the Managers of WNS BPM Americas LLC:

Name	Title	Resident Address
Yogendra Goyal	Manager	515 Madison Avenue, 8th Floor, New York, NY, 10022
Manish Vora	Manager	515 Madison Avenue, 8th Floor, New York, NY,10022
Rajesh lyer	Manager	Gate No 4, Plant 10 / 11 Godrej & Boyce Complex, Pirojshanagar, LBS Marg Vikhroli (West), Mumbai, Maharashtra,400079
Jay Venkateswaran	Manager	515 Madison Avenue, 8th Floor,, New York,New York,7302

AUSTRAL A

CHINA

COSTA RICA

INDIA

CZAJON

ROMANIA

SPAIN

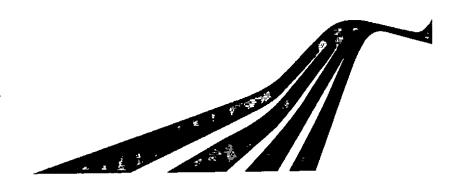
SRI LANKA

SOUTH AFRICA

TURKEY JAE

UK

USA



Page 1



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

DELAWARE, DO HEREBY CERTIFY "WNS BPM AMERICAS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2023.

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

Authentication: 203017097

Date: 03-28-23

7329050 8300 SR# 20231172797 RI SOS Filing Number: 202332632340 Date: 4/10/2023 1:53:00 PM



I, GREGG M. AMORE, 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:

April 10, 2023 01:53 PM

Gregg M. Amore

Secretary of State

Tregs M. Coure

