

State of Rhode Island Office of the Secretary of State

Fee: \$310.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Foreign Corporation

Application for Certificate of Authority

(Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the corporation is <u>Stability AI US Services Corporation</u>

SECTION II

It is incorporated under the laws of State: <u>DE</u> Country: <u>US</u>

This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

SECTION III

The name, if different, which it elects to use in Rhode Island:

- (a) If the name of the corporation does not contain the word "corporation", "company", "incorporated", or "limited", or an abbreviation thereof, add one of these corporate endings for use in Rhode Island **OR**
- (b) if the corporation proposes to qualify and transact business under a different name, list that name:

Note: If option (b) is elected, a Fictitious Business Name Statement (FORM 624A) is required to be filed with this application

SECTION IV

The date of its incorporation is <u>3/6/2023</u>

and the period of its duration is X Perpetual

SECTION V

The location of its principal office is

No. and Street: <u>874 WALKER ROAD, SUITE C</u>

City or Town: DOVER State: DE Zip: 19904 Country: US

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 47 WOOD AVE, SUITE 2

City or Town: BARRINGTON State: RI Zip: 02086

and the name of its proposed registered agent in Rhode Island at that address is <u>REGISTERED AGENTS INC</u>

SECTION VII

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

PROVIDE AI CONSULTING SERVICES

SECTION VIII

(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).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US	
TREASURER	ANDRES TCACH	ANDRES TCACH 874 WALKER ROAD, SUITE C DOVER, DE 19904 US	
SECRETARY	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US	
CEO	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US	
CFO	ANDRES TCACH	874 WALKER ROAD, SUITE C DOVER, DE 19904 US	
coo	OZDEN ONDER	874 WALKER ROAD, SUITE C DOVER, DE 19904 US	
DIRECTOR	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US	

(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).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country				
PRESIDENT	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				
TREASURER	ANDRES TCACH	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				
SECRETARY	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				
CEO	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				
CFO	ANDRES TCACH	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				
coo	OZDEN ONDER	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				
DIRECTOR	MOHAMMAD EMAD MOSTAQUE	874 WALKER ROAD, SUITE C DOVER, DE 19904 US				

SECTION IX

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:

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Num of Shares	
CWP			\$0.0100	1,000.00

Signed this 14 Day of April, 2023 at 2:34:36 PM by the officers(s). This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts

stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.		
By MOHAMMAD EMAD MOSTAQUE Signature of Authorized Officer of the Corporation		
Form No. 150 Revised 09/07		
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STABILITY AI US SERVICES CORPORATION"

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 THIRD DAY OF APRIL, A.D.

2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STABILITY AI US SERVICES CORPORATION" WAS INCORPORATED ON THE SIXTH DAY OF MARCH,

A.D. 2023.

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

RETARY'S OFFICE

Authentication: 203061461

Date: 04-03-23

7330313 8300 SR# 20231263840

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