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State of Rhode Island Office of the Secretary of State

Fee: \$50.00

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

Foreign Business Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT FILING YEAR **2023**: 2023

1. Corporate ID No. 001674466

2. Name of Corporation Aya Healthcare, Inc.

3. Street Address Principal Business Office:

No. and Street: 5930 CORNERSTONE COURT WEST

SUITE 300

City or Town: SAN DIEGO State: CA Zip: 92121 Country: USA

4. Business Phone No.

8666877390

5. State of Incorporation

State: DE

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.

561310

6. Brief Description of the Character of Business Conducted in Rhode Island

TEMPORARY HEALTHCARE STAFFING AGENCY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	ALAN BRAYNIN	5930 CORNERSTONE COURT WEST, SUITE 300 SAN DIEGO, CA 92121 USA	
TREASURER	ALAN BRAYNIN	5930 CORNERSTONE COURT WEST, SUITE 300 SAN DIEGO, CA 92121 USA	
SECRETARY	ALAN BRAYNIN	5930 CORNERSTONE COURT WEST, SUITE 300 SAN DIEGO, CA 92121 USA	
DIRECTOR	ALAN BRAYNIN	5930 CORNERSTONE COURT WEST, SUITE 300 SAN DIEGO, CA 92121 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CNP		\$0.0000	1,000.00	0

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 1 Day of May, 2023 at 5:30:34 PM. 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 § 7-1.2.

By ALAN BRAYNIN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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