

## Certificate of Authority

**FOREIGN Corporation** 

→ Filing Fee: \$310.00 minimum

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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: ALORICA GLOBAL 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: December 14, 2022 And the period of its duration is: CHECK ONLY ONE BOX ✓ Perpetual (on-going) Date certain for dissolution \_ 5. The address of its principal office is: 5161 California Ave, Suite 100, Irvine, CA 92617 6. The name and address of the initial registered agent/office of in Rhode Island: Agent Name Registered Agent Solutions, Inc Street Address (NOT a P.O. Box) 222 Jefferson Blvd, Suite 200 City/Town Warwick Zip Code 02888 State

RHODE ISLAND

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL 1 3 2023

**FILED** 

FORM 150 - Revised: 05/2016

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: holding company for global call center business							
8. (a) The names and re state or country of which			optional, unless d	rectors are required under the laws of the			
NAME		ADDRESS					
Andy Lee		5161 California Ave, Suite 100, Irvine, CA 92617					
Joyce Lee		5161 California Ave, Suite 100, Irvine, CA 92617					
Raphael de Balmann		5161 California Ave, Suite 100, Irvine, CA 92617					
Gregory Belinfanti		5161 California Ave, Suite 100, Irvine, CA 92617					
			-	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	Greg Haller		5161 California Ave, Suite 100, Irvine, CA 92617				
VICE PRESIDENT							
TREASURER	Max Schwendner		5161 California Ave, Suite 100, Irvine, CA 92617				
SECRETARY	Dan Montenaro		5161 California Ave, Suite 100, Irvine, CA 92617				
	<b></b>		_ <del>`</del>	Check the box to indicate an attachment.			
9. The aggregate numb par value, and series, if			issue; itemized b	y classes, par value of shares, shares without			
NUMBER OF SHARES	CLAS	S	SERIES	PAR VALUE OR STATE NO PAR VALUE			
1,500,000,000	500,000,000 Common			\$0.0001			
350,000	Preferred			.\$0.0001			
10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever to be located within Rhode Island during the following year:							
located:			\$ <u>0</u>				
(c) Estimate, as a percentage, 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: Divide (10b) by (10a) and multiply by 100 to obtain the percentage.  0							

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.					
\$ <u> </u>	\$	<del></del>				
(c) Estimate, as a percentage, 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. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.</i>						
<u>0</u>						
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.						
13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX						
✓ Date received (Upon filing)						
Later effective date (Date must be no more than 90 days from the day 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					
Greg Haller		07/12/2023				
Signature of Authorized Officer of the Corporation  SICHOLOGIE HAULERE						



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

DELAWARE, DO HEREBY CERTIFY "ALORICA GLOBAL 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-SIXTH DAY OF JUNE, A.D. 2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALORICA GLOBAL INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF DECEMBER, A.D. 2022.

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

Authentication: 203622956

Date: 06-26-23