	Services Division		
Application for Certificate of Authority	ority	K.	I. DEPT. OF STAT BUS SVCS DIV
OREIGN Business Corporation	•	30	23 SEP -7 P 12:
→ Filing Fee: \$310.00 minimum		20	[] SCr = 1 (= 12)
Pursuant to the provisions of <u>RIGL 7-1.2-1405</u> , the upplies for a Certificate of Authority to transact busi or that purpose submits the following statement:	undersigned foreign corporation iness in the State of Rhode Island	hereby I, and	
1. The name of the corporation is:			
SIMPLE THINGS INC.			
2. It is incorporated under the laws of: Delaw	are		
3. The name, if different, which it elects to use in F	2hode Island is:		
(a) If the name of the corporation in its jurisdiction		the word "ee member"	"
"incorporated", or "limited," or an abbreviation ther above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode corporation will qualify and transact business in Rt filed with this application:	Island, then set forth below the f	ictitious name under whi	ch the
4. The date of its incorporation is: 5/20/2020			
And the period of its duration is: CHECK ONE BC	DX ONLY		
Date certain for dissolution			
5. The address of its principal office is:			
541 Cowper Street, Palo Alto, CA 94301			
6 The name and address of the initial engineers	gent/office in Rhode Island:		
and address of the mitial registered a			
Agent Name Registered Agent Solutions, Inc			
Agent Name Registered Agent Solutions, Inc Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson	Blvd.Suite 200		
Agent Name Registered Agent Solutions, Inc	Blvd.Suite 200 State RHODE ISLAND	Zip Code 02888	

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 purpose	ses which it proposes to	pursue in the	transaction of	of business in Rhode Island are:	
					•
Simple Things Monitoring will be s	elling home security and monitoring	g technology .		These will be self-installed by customers in th	eir home or business.
8. (a) The names and restate or country of which		directors (op	tional, unless	directors are required under the	laws of the
NAME		ADDRESS			
Andrew Rubin	541 Cov	vper Street	Street, Palo Alto, CA 94301		
Dennis Wong	541 Cowper Street, Palo Alto, CA 9430		CA 94301		
Marc Andreessen	en 541 Cowpe		eet, Palo Alto, CA 94301		`
				Check the box to indicate an	
	spective addresses of its which it is incorporated):		cers (mandat	ory if directors are not required u	inder the laws
OFFICE	NAME			ADDRESS	
CEO					
VICE PRESIDENT					
TREASURER					
SECRETARY		<u>,</u> ,	<u> </u>		
				Check the box to indicate an	n attachment 🔲
9. The aggregate number par value, and series, if		authority to is	sue; itemized	by classes, par value of shares	, shares without
NUMBER OF SHARES	CLASS		SERIES	PAR VALUE OR STATE N	O PAR VALUE
15,300,000	Common	<u></u>		0.0001	
1,756,118	Preferred	<u>A</u>		0.0001	
3,456,869	Preferred	<u>B</u>		0.0001	
		. <u></u>			
located within this state	during the following year	bears to the	value of all pi	e of the property of the corporation to be o	
0.1%	ever located. (Note: Perc	entage optain	iea from Wôrl	ksheet.)	
%					
at or from places of busi	ness in Rhode Island du	ring the follow	ving year con	f business to be transacted by the pared to the gross amount there	
0.1%	ration during the following	g year. (Note:	Percentage	obtained from worksheet.)	
%					
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<ol> <li>This application must be accompanied by a <u>Certificate of G</u> formation dated within 60 days of the date of this filing.</li> </ol>	iood Standing/Letter of Status from the state or country of
13. Date when the Certificate of Authority will be effective: CHE	ECK ONE BOX ONLY
Date received (Upon filing)	
Later effective date (Date must be no more than 90 days f	rom the date of filing)
Under penalty of perjury, I declare and affirm that I have exami accompanying attachments, and that all statements contained	ned this Application for Certificate of Authority, including any herein are true and correct.
Type or Print Name of Authorized Officer	Date
Andrew Rubin	08/15/23
Signature of Authorized Officer of the Corporation	

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIMPLE THINGS 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-THIRD DAY OF AUGUST, 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 "SIMPLE THINGS INC." WAS INCORPORATED ON THE TWENTIETH DAY OF MAY, A.D. 2020.

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



a, Secretary of State

Authentication: 204026486 Date: 08-23-23

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SR# 20233326967 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 Gregg M. Amore, Secretary of State

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:

September 07, 2023 12:58 PM

Areg M. Couve

Gregg M. Amore Secretary of State

