

REC'D-RI205 BSD
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State of Rhode Island
Department of State - Business Services Division

Certificate of Correction

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: ~~\$50.00~~ *NO Fee per ME + CCA*

Pursuant to the provisions of RIGL 7-1.2-105 the undersigned corporation hereby submits the following Certificate of Correction:

1. Entity ID Number: 001768417	2. The name of the corporation is: Avochato Inc.
3. The document to be corrected is: Form 100	4. The date the document being corrected was originally filed: 01/24/2024
5. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgment: Filed as domestic corporation instead of foreign corporation <p style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></p>	
6. The new corrected portion of the document states as follows: Company should be established as a Delaware Corporation <p style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></p>	
7. The corrected document MUST be attached to this certificate.	
8. As required by RIGL <u>7-1.2-105</u> , the entity has paid all fees and taxes.	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

8:03
FILED
JAN 26 2024
BY NO fee

9. Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Authorized Officer of the Corporation

Alejandro De Simone

Date

01/26/2024

Signature of Authorized Officer of the Corporation





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 7-1.2-105 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the corporation is Avochato Inc.

SECTION II

It is incorporated under the laws of State: DE Country: USA

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 5/22/2015

and the period of its duration is Perpetual ___

SECTION V

The location of its principal office is

No. and Street: 203 FLAMINGO RD
SUITE 501

City or Town: MILL VALLEY State: CA Zip: 94941 Country: USA

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: 02806

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

SECTION VII

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

SELLING MOBILE MESSAGING PLATFORM SOFTWARE

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	ALEJANDRO DE SIMONE	203 FLAMINGO RD, STE 501 MILL VALLEY, CA 94941 USA
DIRECTOR	ALEJANDRO DE SIMONE	203 FLAMINGO RD, STE 501 MILL VALLEY, CA 94941 USA

(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	ALEJANDRO DE SIMONE	203 FLAMINGO RD, STE 501 MILL VALLEY, CA 94941 USA
DIRECTOR	ALEJANDRO DE SIMONE	203 FLAMINGO RD, STE 501 MILL VALLEY, CA 94941 USA

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 <i>Num of Shares</i>	
CWP			\$0.0100	9,700,000.00
PNP			\$0.0000	3,580,618.00

Signed this 24 Day of January, 2024 at 4:14:44 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 ALEJANDRO DE SIMONE
Signature of Authorized Officer of the Corporation

Form No. 150
Revised 09/07

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVOCHATO 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 FIFTH DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVOCHATO INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF MAY, A.D. 2015.



5752568 8300

SR# 20240047162

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202539088

Date: 01-05-24



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:

January 26, 2024 02:03 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

