



**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 Express Kitchens, Inc.

**SECTION II**

It is incorporated under the laws of State: CT 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 6/27/2017

and the period of its duration is ☒ Perpetual ☐

**SECTION V**

The location of its principal office is

No. and Street: 231 WESTON STREET

City or Town: HARTFORD

State: CT

Zip: 06120

Country: USA

**SECTION VI**

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BLVD.

SUITE 200

City or Town: WARWICK

State: RI

Zip: 02888

and the name of its proposed registered agent in Rhode Island at that address is INCorp SERVICES, INC.

**SECTION VII**

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

SALE OF HOME IMPROVEMENT ITEMS

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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-----------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT | HITESH C. KOTHARI                              | 44 SKY VIEW DRIVE<br>AVON, CT 06001 USA                    |
| DIRECTOR  | HITESH C. KOTHARI                              | 44 SKY VIEW DRIVE<br>AVON, CT 06001 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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-----------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT | HITESH C. KOTHARI                              | 44 SKY VIEW DRIVE<br>AVON, CT 06001 USA                    |
| DIRECTOR  | HITESH C. KOTHARI                              | 44 SKY VIEW DRIVE<br>AVON, CT 06001 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<br>Stock | Par Value Per<br>Share | Total Authorized Shares<br>Num of Shares |          |
|----------------|--------------------|------------------------|------------------------------------------|----------|
| CNP            |                    | A                      | \$0.0000                                 | 1,000.00 |
| CNP            |                    | B                      | \$0.0000                                 | 9,000.00 |

Signed this 5 Day of February, 2024 at 1:36:09 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 HITESH C. KOTHARI  
Signature of Authorized Officer of the Corporation

# Secretary of the State of Connecticut

## Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Tuesday, January 09, 2024 2:53 PM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of incorporation for the below domestic Stock corporation was filed in this office.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far, as indicated by the records of this office, such corporation is in existence.

### Business Details

|                |                        |
|----------------|------------------------|
| Business Name  | EXPRESS KITCHENS, INC. |
| Business ALEI  | US-CT.BER:1243145      |
| Formation Date | 06/27/2017             |



Secretary of the State

Business ALEI: US-CT.BER:1243145

Note: To verify this certificate, visit [Business.ct.gov](https://Business.ct.gov)

Certificate Number: C-00117707



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:

February 05, 2024 01:26 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each name being capitalized.

Gregg M. Amore  
*Secretary of State*

