



State of Rhode Island
Department of State - Business Services Division

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Application for Registration

FOREIGN Limited Liability Company

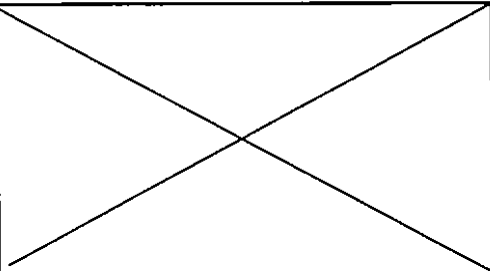
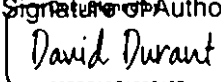
→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:		
EamIn US1 LLC		
Is this company organized in its state or country of formation as a low-profit limited liability company?		Yes No <input checked="" type="checkbox"/>
The name, if different, under which it proposes to register and transact business in Rhode Island is:		
2. The LLC is organized under the laws of:		
Delaware		
3. The date of its organization is:		
November 9, 2023		
And the period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going)		
Date certain for dissolution _____		
4. The name and address of the resident agent/office in Rhode Island is:		
Agent Name		
C T Corporation System		
Street Address (NOT a P.O. Box)		
450 Veterans Memorial Parkway, Suite 7A		
City/Town	State	Zip Code
East Providence	RHODE ISLAND	02914
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
Financial Services		
Check the box to indicate an attachment		

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

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BY mylv3

6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.		
7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is: 200 PORTAGE AVE PALO ALTO, CA 94306-2242		
8. The mailing address for the limited liability company is: 200 Portage Ave., Palo Alto, CA 94306		
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY		
<input type="checkbox"/> Members (Owners) OR <input checked="" type="checkbox"/> Manager(s). Complete the chart below. DO NOT complete the chart below.		
	MANAGER(S) NAME	ADDRESS
Check the box to indicate an attachment <input checked="" type="checkbox"/>		
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.		
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) _____		
<i>Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.</i>		
Type or Print Name of LLC EarnIn US1 LLC	Date 01/24/24	
Signature of Authorized Person  697BF58C12B545E		

Member and Managers: EarnIn US1 LLC

Member and Managers' Address: 200 Portage Avenue, Palo Alto, CA 94306

Name	Title
Activehours, Inc.	Member
David Durant	Manager
Edgar Guerra	Manager


Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EARNIN US1 LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.


Jeffrey W. Bullock, Secretary of State

2563164 8300

SR# 20240239157

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

Authentication: 202665565

Date: 01-25-24



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:

February 14, 2024 02:24 PM

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

Gregg M. Amore
Secretary of State

