



State of Rhode Island

Department of State - Business Services Division

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Certificate of Authority
FOREIGN Non-Profit Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-6-74, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:		
Blueprint Biosecurity		
1a. The name, if different, which it elects to use in Rhode Island is:		
*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.		
2. It is incorporated under the laws of: District of Columbia		
3. The date of its incorporation is: 07/14/2023		
And the period of its duration is: CHECK ONLY ONE BOX		
☒ Perpetual (on-going)		
☐ Date certain for dissolution _____		
4. The address of its principal place of business is: 1775 I St NW Ste 1150, Washington, DC 20006		
5. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Registered Agents Inc		
Street Address (<u>NOT</u> a P.O. Box) 47 Wood Ave, Suite 2		
City/Town Barrington	State RHODE ISLAND	Zip Code 02806

MAIL TO:

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

FILED

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BY

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6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:

Blueprint Biosecurity is dedicated to achieving breakthroughs in humanity's capability to prevent, mitigate, and suppress pandemics. We aim to do this by providing actionable roadmaps, which we call Blueprints, for accelerating and derisking countermeasures and then tackling the main bottlenecks to realizing progress.

Check the box to indicate an attachment ☐

7. The names and respective addresses of its directors and officers are:

OFFICE	NAME	ADDRESS
Director	Andrew Snyder-Beattie	1775 I St NW Ste 1150, Washington, DC 20006
Director	Charlie Petty	1775 I St NW Ste 1150, Washington, DC 20006
Director		
President	Jacob Swett	1775 I St NW Ste 1150, Washington, DC 20006
Vice President		
Treasurer	Jaspreet Pannu	1775 I St NW Ste 1150, Washington, DC 20006
Secretary	Jaspreet Pannu	1775 I St NW Ste 1150, Washington, DC 20006

Check the box to indicate an attachment ☐

8. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Authority, including and accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of ☒ President OR ☐ Vice President	Date
Jacob Swett	21 Feb 2024
Signature of President OR Vice President	
	
Type or Print Name of ☒ Secretary OR ☐ Assistant Secretary	Date
JASPREET PANNU	25 Feb 2024
Signature of Secretary OR Assistant Secretary	
	

Initial File #: N00007749800
Entity Type: Non-Profit Corporation

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF LICENSING AND CONSUMER PROTECTION
CORPORATIONS DIVISION



C E R T I F I C A T E

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this ***CERTIFICATE OF GOOD STANDING*** is hereby issued to

Blueprint Biosecurity

WE FURTHER CERTIFY that the domestic entity is formed under the law of the District on 07/14/2023 ; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 2/19/2024 12:18 PM

Business and Professional Licensing Administration



Rebecca Janovich

REBECCA JANOVICH
Superintendent of Corporations,
Corporations Division

Muriel Bowser
Mayor

Tracking #: lgZwSJdJ



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 27, 2024 12:07 PM

A handwritten signature in black ink, reading "Gregg M. Amore".

Gregg M. Amore
Secretary of State

