



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2024

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <b>001735598</b>		2. Exact name of the Corporation <b>ClarionDoor, Inc.</b>			
3. Principal Office Address <b>10100 W Innovation Dr Ste 300</b>			City <b>Milwaukee</b>	State <b>WI</b>	Zip <b>53226</b>
4. NAICS Code <b>541511</b>		6. Brief description of the character of business conducted in Rhode Island <b>SOFTWARE FOR THE INSURANCE INDUSTRY</b>			
5. State of Incorporation <b>California</b>					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name <b>Jason Liu</b>			Vice-President Name		
Street Address <b>10100 W Innovation Dr Ste 300</b>			Street Address		
City <b>Milwaukee</b>	State <b>WI</b>	Zip <b>53226</b>	City	State	Zip
Secretary Name <b>Mehdi Khodadad</b>			Treasurer Name		
Street Address <b>10100 W Innovation Dr Ste 300</b>			Street Address		
City <b>Milwaukee</b>	State <b>WI</b>	Zip <b>53226</b>	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name <b>Jason Liu</b>			Director Name		
Street Address <b>10100 W Innovation Dr Ste 300</b>			Street Address		
City <b>Milwaukee</b>	State <b>WI</b>	Zip <b>53226</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>			
Changes require an additional filing.		NUMBER OF SHARES <b>1,000</b>	CLASS/SERIES <b>Common Stock</b>	PAR VALUE <b>\$0.0001</b>	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative <b>Jason Liu</b>				Date <b>3/25/2024</b>	
Signature of Authorized Representative		DocuSigned by: <b>Jason Liu</b>			

FILED

MAR 26 2024  
BY **DL6DSB** 9:24 A.M.