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**FOREIGN Business Corporation**


Pursuant to the provisions of RIGL 7-1.2-1411, the undersigned foreign corporation hereby applies for an Amended Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

MAIL TO:

**FILEDAMP**

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BY C96gQ  
AR FORM 151 - Re

8. If there has been an increase in the authorized shares of the corporation complete the following section: <b>*List ALL authorized shares as of this amendment.</b>			
NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Check the box to indicate an attachment <input checked="" type="checkbox"/>			Check box to indicate no change <input type="checkbox"/>
8a. An estimate, as a <b>percentage</b> , of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. <i>(Note: Percentage obtained from worksheet.)</i>			.15 %
8b. An estimate, as a <b>percentage</b> , of the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>(Note: Percentage obtained from worksheet.)</i>			.6363 %
9. As required by RIGL 7-1.2-105, the corporation has paid all fees and taxes.			
10. Except as herein modified, the original Application for Certificate of Authority continues in full force and effect and is hereby confirmed, ratified and incorporated by reference into this Application for Amended Certificate of Authority.			
11. Date when the Amended Certificate of Authority will be effective: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____			
12. Under penalty of perjury, I declare and affirm that I have examined this Application for Amended Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation Steve Krebs			Date 4/19/2024
Signature of Authorized Officer <div>DocuSigned by:  A0231B1DA5C449C</div>			

**Rhode Island Amended Certificate Attachment**

**8. Stock Information**

Number of Authorized Shares	Class	Series	Par Value
6,000,000	Common		.0001
983,146	Preferred	A	.0001
444,030	Preferred	B	.0001
647,100	Preferred	C	.0001
517,501	Preferred	D-1	.0001
246,429	Preferred	D-2	.0001
353,675	Preferred	D-3	.0001