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		f Rhode Islai		Fee: \$50.00	
Office of the Secretary of State					
Division Of Business Services					
RUA		V. River Street	(15		
1636		ce RI 02904-24 1) 222-3040	015		
		1)222-,10-40			
Non-Profit Corporation Application for Certificate of Authority (Section 7-6-74 of the General Laws of Rhode Island, 1956, as amended)					
SECTION 1					
1. The name of the corporation is <u>Citizens Party Inc.</u>					
1(a). The name, if different, which it elects to use in Rhode Island is: Note: If 1(a) is completed, a "Fictitious Business Name Statement" is required to be filed with this application					
SECTION II					
It is incorporated under the laws of State: <u>CA</u> Country: <u>USA</u>					
1/18/24 SECTION III The date of its incorporation is 0/1/2024 The date of its incorporation is 0/1/2024					
and the period of its duration is <u>X</u> Perpetual Date certain for dissolution					
SECTION IV					
The address of its principal place of business is:					
No. and Street:	<u>1968 S. COAST HWY</u> <u>STE 2311</u>				
City or Town:	LAGUNA BEACH	State: <u>CA</u>	Zip: <u>92651</u>	Country: <u>USA</u>	
SECTION V FILED 3:25					
The address of its proposed registered office in Rhode Island is:					
No. and Street:	<u>270 BELLEVUE AVE</u> <u>STE 1036</u>		BY	1208141	
City or Town:	<u>NEWPORT</u>		State: RI	Zip: <u>02840</u>	
Name:	ARASH SHAHRIAR	<u>I</u>			
SECTION VI					

The specific purpose or purposes which it proposes to pursue in conducting its affairs in Rhode Island are:

THIS ORGANIZATION IS ESTABLISHED TO DIRECTLY OR INDIRECTLY ACCEPT CONTRIBUTIONS OR MAKE EXPENDITURES OR BOTH TO ENGAGE IN BUT NOT

LIMITED TO

INFLUENCING OR ATTEMPTING TO INFLUENCE THE SELECTION, NOMINATION, ELECTION,

OR APPOINTMENT OF ANY INDIVIDUAL TO ANY FEDERAL, STATE, OR LOCAL PUBLIC

OFFICE OR OFFICE IN A POLITICAL ORGANIZATION, OR THE ELECTION OF PRESIDENTIAL OR VICE-PRESIDENTIAL ELECTORS, WHETHER OR NOT SUCH INDIVIDUAL

OR ELECTORS ARE SELECTED, NOMINATED, ELECTED, OR APPOINTED.

## SECTION VII

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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	ARASH SHAHRIARI	1968 S. COAST HWY STE 2311 LAGUNA BEACH, CA 92651 USA
SECRETARY	ARASH SHAHRIARI	1968 S. COAST HWY STE 2311 LAGUNA BEACH, CA 92651 USA
CEO	ARASH SHAHRIARI	1958 S. COAST HWY STE 2311 LAGUNA BEACH, CA 92651 USA

Signed this 1 Day of September, 2024 at 3:25:05 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 § 7-6.

## <u>ARAŞH ŞHAHRIARI</u>

Signature of President or Vice President

## <u>ARAŞH SHAHRIARI</u>

Signature of Secretary or Assistant Secretary

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## Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:	Citizens Party Inc.
Entity No.:	6294559
<b>Registration Date:</b>	07/18/2024
Entity Type:	Nonprofit Corporation - CA - Public Benefit
Formed In:	CALIFORNIA
Status:	Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



**IN WITNESS WHEREOF,** I execute this certificate and affix the Great Seal of the State of California this day of September 01, 2024.

SHIRLEY N. WEBER, PH.D. Secretary of State

Certificate No.: 243520319

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.

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:

September 01, 2024 03:25 PM

Treng M. Course

Gregg M. Amore Secretary of State

