RI SOS Filing Number: 202460676940 Date: 10/17/2024 12:32:00 PM

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Application for Registration

sign Env	relope ID: 27E66C28-5948-4F6F-907E-7	3DF1BEF8805		24 24		
	State of Rhode Island Department of State - Bu	siness Services Division		CT 17		
	cation for Registration	1		05 BS 12:3:		
→ Filii	ng Fee: \$150.00			D 2:00		
pplies t	nt to the provisions of RIGL <u>7-16-4</u> for a Certificate of Registration to submits the following statement:	transact business in the State of		55.		
1. The	name of the limited liability comp	any is:				
Payı	ment Progress LLC			• • • • • • • • • • • • • • • • • • • •		
Is this	company organized in its state or	country of formation as a low-pr	ofit limited liability company?	Yes No 🗸		
The na	ime, if different, under which it pro	oposes to register and transact b	usiness in Rhode Island is:			
				٤.,		
2. The	LLC is organized under the laws	of: Delaware				
3. The	date of its organization is: 07/1	6/2024	·			
And th	e period of its duration is: CHEC	K ONE BOX ONLY		MET us when $\Phi = -0$		
▼ Pe	erpetual (on-going)			- 1		
	ate certain for dissolution			So 57.		
4. The	name and address of the resider	nt agent/office in Rhode Island is				
Agent	***************************************					
Street	Address (<u>NOT</u> a P.O. Box) 222 、	Jefferson Boulevard, Suite	200	-thibigsin if it		
City/To	wn Warwick	State RHODE ISLAND	Zip Code 02888			
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Provides services to facilitate the transmission of money, ensuring secure and compliant financial transactions						
				Mr. Ferrer		
			Check the box to indica	te an attachment 🔲		
148 W. I Phone:	O: n of Business Services River Street, Providence, Rhode Islan (401) 222-3040 e: www.sos.n.gov	nd 02904-2615	00 00	T 17 2024		

MAI	IL T	O:

FORM 450 - Revised

	The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at my time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable ligence.						
7. The address of the office required to be maintained in the state or country of its organization by the laws of if not so required, of the principal office of the foreign limited liability company is:							
		• • •					
8. The mailing address for the limited liability company is:							
	2 Broad Street, Suite 403, Red Bank, NJ 07701						
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY Members (Owners) OR Manager(s). Complete the chart below. DO NOT complete the chart below.							
		Laura Nadler	12 Broad Street, Suite 403, Red Bank, N	NJ 07701			
		Omer Ismail Mitchell Hochberg	12 Broad Street, Suite 403, Red Bank, I 12 Broad Street, Suite 403, Red Bank, I				
	Check the box to indicate an attachment— 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						
	Date received (Upon filing)						
	Later effective date (Date must be no more than 90 days from the date of filing)						
	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.						
	Type or Print Name of LLC		Date 10/8/2024	5770 5770			
	Payment Progress LLC						
	Signature of Authorized Person						
	Mitch	ell Hoduberg		٠٠ ٧٠٠			

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estrat e in

<u>Delaware</u>

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PAYMENT PROGRESS 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 ELEVENTH DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PAYMENT PROGRESS LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2024.

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

4134802 8300 SR# 20243930279 Authentication: 204613953

Date: 10-11-24

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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:

October 17, 2024 12:32 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

