A CONTRACT	State of Rhode Island Department of State - Business Services Division
	Department of State - Business Services Division

Application for Certificate of Authority FOREIGN Business Corporation

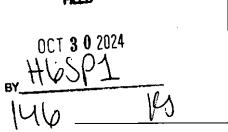
→ Filing Fee: \$310.00 minimum



Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

or that purpose submits the following statement.							
1. The name of the corporation is:							
Genomics Inc.							
2. It is incorporated under the laws of: Delaware							
3. The name, if different, which it elects to use in Rhode Island is:							
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:							
(b) 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:							
4. The date of its incorporation is: 5th May 2020							
And the period of its duration is: CHECK ONE BOX ONLY							
X Perpetual (on-going)							
Date certain for dissolution							
5. The address of its principal office is:							
King Charles House, Oxford, OX1 1JD, United Kingdom							
6. The name and address of the initial registered agent/office in Rhode Island:							
Agent Name C T Corporation System							
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A							
City/Town East Providence	State RHODE ISLAND	Zip Code 02914					

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



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7. The purpose or purpo	oses which it prop	oses to pursue in the	transaction of t	ousiness in Rhode Island are:			
Biotech delivering test res	ults and providing g	genome related R&D so	ervices.GF				
J		,					
8 (a) The names and r	espective address	es of its directors (or	tional unless di	rectors are required under the laws of the			
state or country of whic			alonal, unless u	rectors are required under the laws of the			
NAME			Δ	DDRESS			
			ADDRESS				
		· · ·					
		····					
	- · · · · · · · · · · · · · · · · · · ·	·· _		Check the box to indicate an attachment			
8. (b) The names and re	espective address	es of its principal offi	cers (mandatory	if directors are not required under the laws			
of the state or country of			· · ·				
OFFICE	N	IAME		ADDRESS			
PRESIDENT							
	Gilean McVean		King Charles He	ouse, Oxford, OX1 1JD, United Kingdom			
VICE PRESIDENT	Gilean McVean		King Charles House, Oxford, OX1 1JD, United Kingdom				
	Gilean Nic vean		King Charles H				
TREASURER	Gilean McVean		King Charles House, Oxford, OX1 1JD, United Kingdom				
	Gilean Me vean		King Charles II				
SECRETARY	Gilean McVean		King Charles H	ouse, Oxford, OX1 1JD, United Kingdom			
				Check the box to indicate an attachment			
		-	sue; itemized by	y classes, par value of shares, shares without			
par value, and series, if NUMBER OF SHARES	-	5, 15.	SERIES	PAR VALUE OR STATE NO PAR VALUE			
	CLASS		SERIES				
10000	Common	Ordinary		0.001			
	·	<u> </u>					
10 An estimate as a n	ercentage of the	proportion that the e	stimated value /	of the property of the corporation to be			
				erty of the corporation to be owned during			
the following year, when							
4							
<u> </u>	5						
44 A 5 5 1 1 1 1 1				uniness to be transported by the extraction			
11. An estimate, as a percentage, 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. (Note: Percentage obtained from worksheet.)							
0	-		5				
<u>0</u> %							

12. 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 this filing.					
13. Date when the Certificate of Authority will be effective: CHECK ONE	BOX ONLY				
Date received (Upon filing)					
X Later effective date (Date must be no more than 90 days from the date of filing)					
14. Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct					
Type or Print Name of Authorized Officer	Date				
Gilcan McVean	17 October 2024				
Signature of Authorized Officer of the Corporation					



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENOMICS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



7930114 8300 SR# 20244014350 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204692892 Date: 10-22-24

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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:

October 30, 2024 01:46 PM

Treng M. Course

Gregg M. Amore Secretary of State

