



State of Rhode Island
Office of the Secretary of State

Fee: \$310.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Corporation
Application for Certificate of Authority

(Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the corporation is SWITCHBOARD PUBLIC BENEFIT CORP.

SECTION II

It is incorporated under the laws of State: DE Country: USA

This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

SECTION III

The name, if different, which it elects to use in Rhode Island:

(a) *If the name of the corporation does not contain the word "corporation", "company", "incorporated", or "limited", or an abbreviation thereof, add one of these corporate endings for use in Rhode Island OR*

(b) *if the corporation proposes to qualify and transact business under a different name, list that name:*

Note: If option (b) is elected, a Fictitious Business Name Statement (FORM 624A) is required to be filed with this application

SECTION IV

The date of its incorporation is 4/5/2021

and the period of its duration is Perpetual

SECTION V

The location of its principal office is

No. and Street: 1 THOMAS CIRCLE NW SUITE 550
SUITE 1110

City or Town: WASHINGTON

State: DC Zip: 20005 Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 47 WOOD AVE SUITE 2

City or Town: BARRINGTON

State: RI

Zip: 02806

and the name of its proposed registered agent in Rhode Island at that address is REGISTERED AGENTS INC

SECTION VII

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

SWITCHBOARD BUILDS DIGITAL TOOLS FOR CAMPAIGNS.

SECTION VIII

(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

Title	Individual Name <small>First, Middle, Last, Suffix</small>	Address <small>Address, City or Town, State, Zip Code, Country</small>
PRESIDENT	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
PRESIDENT	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
TREASURER	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
TREASURER	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
SECRETARY	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
SECRETARY	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
DIRECTOR	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
DIRECTOR	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

Title	Individual Name <small>First, Middle, Last, Suffix</small>	Address <small>Address, City or Town, State, Zip Code, Country</small>
PRESIDENT	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
PRESIDENT	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
TREASURER	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
TREASURER	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
SECRETARY	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
SECRETARY	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
DIRECTOR	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA
DIRECTOR	ERIC MAYEFSKY	1919 N. NASH ST. APT 2105 ARLINGTON, VA 22209 USA

SECTION IX

The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Num of Shares</i>

CWP		\$0.0001	10,000,000.00
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Signed this 21 Day of January, 2025 at 11:21:28 AM 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 § 7-1.*

By ERIC MAYEFSKY

Signature of Authorized Officer of the Corporation

Form No. 150
Revised 09/07

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SWITCHBOARD PUBLIC BENEFIT CORP." 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 SIXTH DAY OF DECEMBER, 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 SAID "SWITCHBOARD PUBLIC BENEFIT CORP." WAS INCORPORATED ON THE FIFTH DAY OF APRIL, A.D. 2021.

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




Jeffrey W. Bullock, Secretary of State

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SR# 20244412965

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 205055451

Date: 12-06-24