	State of R Office of the S	hode Islar ecretary o				Fee: \$310.0
	Division Of B	usiness Serv	vices			
		River Street				
	Providence		515			
7630	(401) 2	222-3040				
Foreign Corporation Application for Certificate of Autho (Section 7-1.2-1405 of the General Laws		ended)				
	SECT	ION I				
The name of the corporation is <u>RABO</u>	NA CORPORATION					
It is incorporated under the laws of Stat	SECTI e: <u>NY</u> Country: <u>USA</u>	ON II				
This Application for Certificate of Author the 90th day after the date of this filing	ity shall be effective upon fili	ng unless a :	specified c	late is provided	which shall be no	o later than
The name, if different, which it elects to (a) If the name of the corporation does n thereof, add one of these corporate end (b) if the corporation proposes to qualify	ot contain the word "corporat ings for use in Rhode Island (ion", "compa CR	-	-	mited", or an abbr	eviation
Note: If option (b) is elected, a Fictitiou.	s Business Name Statement (1	FORM 624A) is requir	ed to be filed w	ith this applicatio	n
The date of its incorporation is <u>6/18/202</u>	SECTION SECTION	VI NC				
and the period of its duration is \underline{X} Per	petual					
The location of its principal office is	SECTI	ON V				
No. and Street: 112 WEST 3	4TH STREET					
City or Town: <u>NEW YORK</u>		State: <u>N</u>	<u>VY</u>	Zip: <u>10120</u>	Country: US	<u>5A</u>
The address of its proposed registered of No. and Street: 222 IFFFERSON	SECTION Fice in Rhode Island is <u>BLVD. 2ND FLOOR</u>	ON VI				
City or Town: <u>WARWICK</u>	<u>BLVD. 2ND FLOOR</u>	S	State: RI			Zip: <u>02888</u>
and the name of its proposed registered	agent in Rhode Island at that	address is <u>[</u>	JNITED C	CORPORATE S	SERVICES, INC.	-
The purpose or purposes which it propos TELECOMMUNICATIONS COMPA			s in Rhode	Island are:		
(a) The names and respective addresses which it is incorporated).	SECTIC of its directors (optional unles		are require	d under the laws	s of the state or co	ountry of
Title	Individual Name First, Middle, Last, Suffix				dress , State, Zip Code, Countr	у
PRESIDENT	MAURIZIO D'ALESSANDRO			112 WEST	34TH STREET NY 10120 USA	

PRESIDENT	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
TREASURER	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
TREASURER	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
SECRETARY	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
SECRETARY	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
DIRECTOR	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
DIRECTOR	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
	PRESIDENT	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	PRESIDENT	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	TREASURER	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	TREASURER	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	SECRETARY	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	SECRETARY	STEFANO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	DIRECTOR	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
	DIRECTOR	MAURIZIO D'ALESSANDRO	112 WEST 34TH STREET NEW YORK, NY 10120 USA
1			

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 Num of Shares	
	CNP			\$0.0000	200.00
L					

Signed this 13 Day of March, 2025 at 12:20:12 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 § 7-1.*

By MAURIZIO D'ALESSANDRO

Signature of Authorized Officer of the Corporation

Form No. 150 Revised 09/07

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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: DOS ID Number: Entity Type: Entity Status: Date of Initial Filing with DOS:

Statement Status: Statement Due Date: RABONA CORPORATION 7356115 DOMESTIC BUSINESS CORPORATION EXISTING 06/18/2024

CURRENT 06/30/2026

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on February 13, 2025 at 10:50 A.M.

WALTER T. MOSLEY Secretary of State

Brandon C. Hughen

BRENDAN C. HUGHES Executive Deputy Secretary of State

Authentication Number: 100007468989 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <u>http://ecorp.dos.ny.gov</u>

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:

March 13, 2025 12:19 PM

Treng M. Course

Gregg M. Amore Secretary of State

