

State of Rhode Island Office of the Secretary of State

Fee: \$310.0

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

Foreign Cor	poration	
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 **RABONA CORPORATION**

SECTION II

It is incorporated under the laws of State: NY 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 6/18/2024

and the period of its duration is X Perpetual

SECTION V

The location of its principal office is

No. and Street:

112 WEST 34TH STREET

City or Town:

NEW YORK

State: NY

Zip: 10120

Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street:

222 JEFFERSON BLVD. 2ND FLOOR

City or Town:

WARWICK

State: RI

Zip: <u>02888</u>

and the name of its proposed registered agent in Rhode Island at that address is UNITED CORPORATE SERVICES, INC.

SECTION VII

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

TELECOMMUNICATIONS COMPANY (RESELLERS)

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).

l	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
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(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

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	
ı	CNP			\$0.0000	200.00

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: RABONA CORPORATION

DOS ID Number: 7356115

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING **Date of Initial Filing with DOS:** 06/18/2024

Statement Status: CURRENT Statement Due Date: 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.

Brandon C. Heyles

WALTER T. MOSLEY Secretary of State

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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