RI SOS Filing Number: 202567108740 Date: 3/14/2025 12:30:00 PM



State of Rhode Island Department of State - Business Services Division

REC'D RIDDS ESD '21 'AR 14 P. 12:30:

Application for Amended Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$75.00 (\$235 for an increase in authorized shares)

Pursuant to the provisions of RIGL <u>7-1.2-1411</u>, the undersigned foreign corporation hereby applies for an Amended Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number:	2. The name of the corporation is:				
001743615	AUDIANCE, Inc.				
3. It is incorporated under the laws of:		4. List the date the Certificate of Authority was issued by the RI Department of State:			
Delaware		07-21-2022			
If the entity's name has cha state the new name:	nged,				
		Check box to indicate no change			
6. The name, if different, which	n it elects to use in Rhode Island	J is:			
"incorporated," or "limited," or above corporate endings for u (b) If the corporate name is no	an abbreviation thereof, then lis se in Rhode Island: ot available in Rhode Island, the	ation does not contain the word "corporation," "company," to the name of the corporation with the addition of one of the in set forth below the fictitious name under which the in the "Fictitious Business Name Statement" to be filed with this			
transacted in the State of Rhode	island.	ection: *The new purpose should include ALL activity to be			
Check the box to indicate an a	attachment	Check box to indicate no change ✓			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

MAR 14 2025 BY 114 (2:30)

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE (PAR VALUE OR STATE NO PAR VALUE		
2700	CWP		\$0.01			
Check the box to indicate	e an attachment		Check	box to indicate	no change	
of the corporation to be l	rcentage, of the proportion ocated within this state duporation to be owned during the definition worksheet.)	uring the following year b	ears to the value	100	%	
8b. 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. (<i>Note: Percentage obtained from worksheet.</i>)				100	<u> </u>	
9. As required by RIGL 7	-1.2-105, the corporation	has paid all fees and tax	es.			
	dified, the original Applica d and incorporated by refe					
11. Date when the Amen	ded Certificate of Authorit	ty will be effective: CHEC	K ONE BOX ONLY			
✓ Date received (Upon	n filing)				•	
Later effective date	(Date must be no more th	nan 90 days from the date	e of filing)			
	jury, I declare and affirm to ying attachments, and tha				te of Authority,	
Name of Authorized Officer of the Corporation				Date		
Hailey Simon				02/21/2025		
Signature of Authorized	Officer					

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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:

March 14, 2025 12:30 PM

Gregg M. Amore

Secretary of State

Tregs M. Coure

