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# 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 Red Envelope Delta Inc.

**SECTION II** 

It is incorporated under the laws of State: <u>DE</u> Country: <u>USA</u>

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 1/2/2025

and the period of its duration is X Perpetual

**SECTION V** 

The location of its principal office is

No. and Street: <u>131 CONTINENTAL DRIVE, SUITE 301</u>

City or Town: NEWARK State: DE Zip: 19713 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:  $\underline{BARRINGTON}$  State: RI Zip:  $\underline{02806}$ 

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

#### **SECTION VII**

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

MONEY TRANSMITTER/ CURRENCY EXCHANGE

### **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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA	
TREASURER	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA	
SECRETARY	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA	
CEO	PRABHAKAR NIMMAKAYALA	VILLA F23 PEARL JUMEIRA DUBAI, FC ARE	
VICE PRESIDENT	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA	
DIRECTOR	PRABHAKAR NIMMAKAYALA	VILLA F23 PEARL JUMEIRA DUBAI, ARE	
DIRECTOR	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 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	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA			
TREASURER	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA			
SECRETARY	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA			
CEO	PRABHAKAR NIMMAKAYALA	VILLA F23 PEARL JUMEIRA DUBAI, FC ARE			
VICE PRESIDENT	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 USA			
DIRECTOR	PRABHAKAR NIMMAKAYALA	VILLA F23 PEARL JUMEIRA DUBAI, ARE			
DIRECTOR	JOSHUA WASSERMAN	609 MIRABAY BLVD APOLLO BEACH, FL 33572 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	
CWP			\$1.0000	100.00

**Signed this 6 Day of June, 2025 at 3:44:49 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 <u>JOSHUA WASSERMAN</u> Signature of Authorized Officer of the Corporation		
Signature of Authorized Officer of the Corporation		
Form No. 150 Revised 09/07		
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I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "RED ENVELOPE DELTA 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 SIXTH DAY OF JUNE, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RED ENVELOPE DELTA INC." WAS INCORPORATED ON THE SECOND DAY OF JANUARY, A.D. 2025.

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

SSE TARY'S OFFICE OF THE STATE OF THE STATE

10054183 8300 SR# 20252992056

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

C. G. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

haruni Patibanda-Sanchez, Secretary of State Authentication: 203884067

Date: 06-06-25

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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:

June 06, 2025 03:42 PM

Gregg M. Amore

Tregs M. Coure

Secretary of State

