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State of Rhode Island
Office of the Secretary of State
Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

FILED

Fee: \$310.01

JUL 14 2025 1:37pm
online filing
BY LKS 1331166

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 Vim, Inc.

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:

Vim RI, Inc.

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 5/11/2015

and the period of its duration is ☒ Perpetual ☐

SECTION V

The location of its principal office is

No. and Street: 109 W 27TH ST. FLOOR 11

City or Town: NEW YORK

State: NY

Zip: 10001

Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BLVD. SUITE 200

City or Town: WARWICK

State: RI

Zip: 02888

and the name of its proposed registered agent in Rhode Island at that address is INCORORATING SERVICES, LTD.

SECTION VII

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

SOFTWARE COMPANY

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
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PRESIDENT	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
PRESIDENT	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
SECRETARY	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
SECRETARY	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
CFO	MALVIN HOXHALLARI	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
CFO	MALVIN HOXHALLARI	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ASAF DAVID	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	SHMIL LEVY	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ANDREW PERLMAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	CHANDRAMOUL EFSWARAN VENKATESAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ASAF DAVID	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	SHMIL LEVY	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ANDREW PERLMAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	CHANDRAMOULEESWARAN VENKATESAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 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	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
PRESIDENT	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
SECRETARY	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
SECRETARY	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
CFO	MALVIN HOXHALLARI	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
CFO	MALVIN HOXHALLARI	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ORON AFEK	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA

DIRECTOR	ASAF DAVID	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	SHMIL LEVY	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	ANDREW PERLMAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	CHANDRAMOULEESWARAN VENKATESAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
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DIRECTOR	ANDREW PERLMAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 USA
DIRECTOR	CHANDRAMOULEESWARAN VENKATESAN	109 W 27TH ST. FLOOR 11 NEW YORK, NY 10001 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			\$0.0003	125,353,000.00
PWP			\$0.0003	82,467,253.00

Signed this 14 Day of July, 2025 at 1:28:59 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 MALVIN HOXHALLARI

Signature of Authorized Officer of the Corporation

Form No. 150
Revised 09/07

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Delaware

The First State

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I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIM, 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 THIRTIETH DAY OF JUNE, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VIM, INC." WAS INCORPORATED ON THE ELEVENTH DAY OF MAY, A.D. 2015.

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



5733675 8300

SR# 20253234022

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

C. P. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 204081426

Date: 06-30-25



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:

July 14, 2025 01:37 PM

A handwritten signature in black ink, reading "Gregg M. Amore".

Gregg M. Amore
Secretary of State

