State of Rhode Island
Department of State - Business Services Division

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Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: $50.00

Pursuant to the provisions of RIGL 7-1.2-402, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. Entity ID Number:	2. The name of the Corporation is:
001791727	iXsystems, Inc

3. The fictitious business name to be used is:
TrueNAS

4. The corporation is organized under the laws of:	5. The date of incorporation is:
Delaware	April 1, 2010

6. The address of its registered office within Rhode Island is:		
Street Address	222 Jefferson Boulevard	
City: Warwick	State: **RHODE ISLAND**	Zip: 02888

7. The business in which it is engaged:
Manufacturer of Enterprise Storage

8. Applicant is otherwise authorized to do business in the state of Rhode Island.

9. *Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name Statement and that the information contained herein is true and correct.*	
Name of Authorized Officer of the Corporation: Kristy Mao	Date: 07/14/2025
Signature of Authorized Officer of the Corporation: Kristy Mao, SVP CFO	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
JUL 18 2025, 1215
BY DGXXT

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.

5. Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these Articles of Incorporation:

Check the box to indicate an attachment ☐

6. The name and address of each incorporator is:

Name JOSEPH CORTE	Address 28 DOVER STREET	
City/Town PROVIDENCE	State RI	Zip Code 02908
Name	Address	
City/Town	State	Zip Code
Name	Address	
City/Town	State	Zip Code

7. Date when these Articles of Incorporation will be effective: **CHECK ONE BOX ONLY**

☑ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) _____

8. Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Incorporator JOSEPH CORTE	Date 7-18-25
Signature of Incorporator	
Type or Print Name of Incorporator	Date
Signature of Incorporator	
Type or Print Name of Incorporator	Date
Signature of Incorporator	

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