



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 NIUM, 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:

*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 3/3/2015

and the period of its duration is ☒ Perpetual ☐

SECTION V

The location of its principal office is

No. and Street: 85 2ND STREET, 2ND FLOOR

City or Town: SAN FRANCISCO

State: CA

Zip: 94105

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 REGISTERED AGENT SOLUTIONS, INC.

SECTION VII

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

MONEY TRANSMITTER - MTO

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	ALEX JOHNSON	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
TREASURER	MICHAEL BEST	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA

SECRETARY	MICHAEL BERMINGHAM	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
VICE PRESIDENT	DASHIELL VICTOR	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
DIRECTOR	MICHAEL BEST	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
DIRECTOR	DASHIELL VICTOR	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
DIRECTOR	ALEX JOHNSON	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 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	ALEX JOHNSON	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
TREASURER	MICHAEL BEST	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
SECRETARY	MICHAEL BERMINGHAM	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
VICE PRESIDENT	DASHIELL VICTOR	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
DIRECTOR	MICHAEL BEST	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
DIRECTOR	DASHIELL VICTOR	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 USA
DIRECTOR	ALEX JOHNSON	85 2ND STREET, 2ND FLOOR SAN FRANCISCO, CA 94105 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			\$100.0000	9,510.00

**Signed this 24 Day of July, 2025 at 3:23:54 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 MICHAEL BEST  
Signature of Authorized Officer of the Corporation

# Delaware

The First State

Page 1

*I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NIUM, 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 TWENTY-SIXTH 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 "NIUM, INC." WAS INCORPORATED ON THE THIRD DAY OF MARCH, A.D. 2015.*

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



5702837 8300

SR# 20253197050

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in cursive script, reading "C. P. Sanchez".

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 204051949

Date: 06-26-25