

**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 IThe name of the corporation is NORSEMAN, INC.**SECTION II**It is incorporated under the laws of State: MD Country: USAThis 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 08/04/2025**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 1/6/1992and the period of its duration is ☒ Perpetual ☐**SECTION V**

The location of its principal office is

No. and Street: 700 NARRAGANSETT PARK DR
STE 100City or Town: PAWTUCKETState: RIZip: 02861Country: USA**SECTION VI**

The address of its proposed registered office in Rhode Island is

No. and Street: 700 NARRAGANSETT PARK DR
STE 100City or Town: PAWTUCKETState: RIZip: 02861and the name of its proposed registered agent in Rhode Island at that address is NORTHWEST REGISTERED AGENT LLC**SECTION VII**

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

TO PROVIDE IT HARDWARE, SOFTWARE, SERVICES, AND RELATED TECHNOLOGY SOLUTIONS TO PUBLIC AND PRIVATE SECTOR CLIENTS.**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	TOBY GROFF	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
TREASURER	BETH SMITH	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
SECRETARY	BREANNA RICE	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
VICE PRESIDENT	KEVIN KREIDER	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
DIRECTOR	KEVIN KREIDER	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 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	TOBY GROFF	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
TREASURER	BETH SMITH	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
SECRETARY	BREANNA RICE	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
VICE PRESIDENT	KEVIN KREIDER	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 USA
DIRECTOR	KEVIN KREIDER	700 NARRAGANSETT PARK DR STE 100 PAWTUCKET, RI 02861 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			\$0.0100	1,000.00

Signed this 4 Day of August, 2025 at 1:51:24 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 TOBY GROFF
Signature of Authorized Officer of the Corporation

STATE OF MARYLAND

Department of Assessments and Taxation

I, ROBERT YEAGER OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT NORSEMAN, INC. (D03349743), INCORPORATED JANUARY 06, 1992, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 24, 2025.



Daniel K. Phillips
Director



700 East Pratt Street, 2nd Flr, Ste 2700, Baltimore, Maryland 21202
Telephone Baltimore Metro (410) 767-1344 / Outside Baltimore Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

Online Certificate Authentication Code: qRaIU5PvHEGozhij6b9hSg
To verify the Authentication Code, visit <http://dat.maryland.gov/verify>



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:

August 04, 2025 01:49 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized.

Gregg M. Amore
Secretary of State

