State of Rhode Island
Department of State - Business Services Division

Certificate of Authority

FOREIGN Non-Profit Corporation

→ Filing Fee: $50.00

Pursuant to the provisions of RIGL 7-6-74, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:
GingerCare Holding, Inc.
1a. The name, if different, which it elects to use in Rhode Island is:
*If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application.
2. It is incorporated under the laws of: Delaware
3. The date of its incorporation is: 5/29/25
And the period of its duration is: **CHECK ONLY ONE BOX** ☒ Perpetual (on-going) ☐ Date certain for dissolution _____
4. The address of its principal place of business is: 589 Highland Avenue, Needham, MA 02494
5. The name and address of the initial registered agent/office in Rhode Island is:
Agent Name: Cogency Global Inc.
Street Address (NOT a P.O. Box): 222 Jefferson Boulevard

City/Town	State	Zip Code
Warwick	**RHODE ISLAND**	02888

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

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6. The purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:

Improving the lives of elderly individuals by providing housing to seniors and related services and support.

Check the box to indicate an attachment ☐

7. The names and respective addresses of its directors and officers are:

OFFICE	NAME	ADDRESS
Director		
Director		
Director		
President		
Vice President		
Treasurer		
Secretary		

Check the box to indicate an attachment ☒

8. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Authority, including and accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of ☒ President OR ☐ Vice President	Date
Richard Feldman	7/29/2025

Signature of President OR Vice President — DocuSigned by: [signature] G7402A263966440...

Type of Print Name of ☒ Secretary OR ☐ Assistant Secretary	Date
James Friedman	8/1/2025

Signature of Secretary ~~OR Assistant~~ Secretary — [signature] James Friedman 662...

TWO SIGNATURES ARE REQUIRED

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.

GINGERCARE HOLDING, INC.
Certificate of Authority

ATTACHMENT

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7. Directors & Officers

Name & Address	Title
Richard Feldman 589 Highland Avenue Needham, MA 02494	President/Director
Joel Kirchick 589 Highland Avenue Needham, MA 02494	Vice Chair/Director
Kathleen Campbell 589 Highland Avenue Needham, MA 02494	Vice Chair/Director
John Fisher 589 Highland Avenue Needham, MA 02494	Treasurer/Director
James Friedman 589 Highland Avenue Needham, MA 02494	Secretary/Director

Delaware

The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GINGERCARE HOLDING, 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 FIRST DAY OF AUGUST, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GINGERCARE HOLDING, INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF MAY, A.D. 2025.

C. B. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

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SR# 20253550113

Authentication: 204366853

Date: 08-01-25

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

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 12:23 PM

Gregg M. Amore
Secretary of State