RI SOS Filing Number: 202577617960 Date: 8/14/2025 12:18:00 PM

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**State of Rhode Island**
**Department of State - Business Services Division**

**Annual Report for the year:** 2024
**Corporation**

→ Filing period: February 1 - May 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

| 1. Entity ID Number | 2. Exact name of the Corporation | | | |
|---|---|---|---|---|
| 001676469 | AKA Wireless, Inc. | | | |
| 3. Principal Office Address | | City | State | Zip |
| 8510 Colonnade Center Drive, Suite 300 | | Raleigh | NC | 27615 |
| 4. NAICS Code | 6. Brief description of the character of business conducted in Rhode Island | | | |
| 443142 | Operating company for the retail sale of wireless communications and ancillary sales and services | | | |
| 5. State of Incorporation | | | | |
| SD | | | | |

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

| | | | | | |
|---|---|---|---|---|---|
| President Name: Scott Tollett | | | Vice-President Name: Gregory Rowe | | |
| Street Address: 8510 Colonnade Center Drive, Suite 300 | | | Street Address: 8510 Colonnade Center Drive, Suite 300 | | |
| City: Raleigh | State: NC | Zip: 27615 | City: Raleigh | State: NC | Zip: 27615 |
| Secretary Name: Gregory Rowe | | | Treasurer Name: Elizabeth Martin-Quinn | | |
| Street Address: 8510 Colonnade Center Drive, Suite 300 | | | Street Address: 8510 Colonnade Center Drive, Suite 300 | | |
| City: Raleigh | State: NC | Zip: 27615 | City: Raleigh | State: NC | Zip: 27615 |

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

| | | | | | |
|---|---|---|---|---|---|
| Director Name: Richard Balot | | | Director Name: | | |
| Street Address: 8510 Colonnade Center Drive, Suite 300 | | | Street Address: | | |
| City: Raleigh | State: NC | Zip: 27615 | City: | State: | Zip: |
| Director Name: | | | Director Name: | | |
| Street Address: | | | Street Address: | | |
| City: | State: | Zip: | City: | State: | Zip: |

9. Shares Authorized

**This information is currently of record in the Department of State.**

**Changes require an additional filing.**

10. Shares Issued — Check the box to indicate an attachment ☐

| NUMBER OF SHARES | CLASS/SERIES | PAR VALUE |
|---|---|---|
| 1,000 | Common | $1.00 |
| | | |

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

***Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.***

FILED

Name of Authorized Representative: Greg Rowe

Date: 4/4/25

Signature of Authorized Representative: Greg Rowe

AUG 14 2025

BY NTdE7

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

FORM 630- Revised 12/2023