



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:		
Consumer Benefits of America		
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:		
Nebraska		
3. The date of its incorporation is:		
11/3/2017		
And the period of its duration is: CHECK ONLY ONE BOX		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
4. The address of its principal place of business is:		
5625 NW Central Drive, Suite D-100, Houston, Texas 77092		
5. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Corporate Creations Network Inc.		
Street Address (NOT a P.O. Box) 10 Dorrance Street, #700		
City/Town	State	Zip Code
Providence	RHODE ISLAND	02903

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 AMF
MAY 29 2024
BY Confirm #
1187216

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

The basic purpose, object and business of this organization shall primarily be to promote consumer awareness in the marketplace through seminars; to act as a clearinghouse of information that will aid consumers in making informed purchases;

Check the box to indicate an attachment

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

OFFICE	NAME	ADDRESS
Director	Deon Kuhre	9348 West 13th Place, Lakewood, CO 80215
Director	Lauren Mitsakis	4519 Hickory Downs Dr, Houston, TX 77084
Director	Lauren Andrews	12995 Oracle Rd, Suite #420, Tucson, AZ 85739
President	Lauren Mitsakis	4519 Hickory Downs Dr, Houston, TX 77084
Vice President		
Treasurer		
Secretary	Lauren Andrews	12995 Oracle Rd, Suite #420, Tucson, AZ 85739

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 <input checked="" type="checkbox"/> President OR <input type="checkbox"/> Vice President Lauren Mitsakis	Date 6/6/2024
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Signature of President OR Vice President 

Type or Print Name of <input checked="" type="checkbox"/> Secretary OR <input type="checkbox"/> Assistant Secretary Lauren Andrews	Date 6/6/2024
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Signature of Secretary OR Assistant Secretary 
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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.

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

The basic purpose, object, and business of this organization shall primarily be to promote consumer awareness in the marketplace through seminars; to act as a clearinghouse of information that will aid consumers in making informed purchases; to make them aware of their legal rights and obligations as consumers; to lobby for more effective consumer protection legislation; to make consumers more aware of comparison shopping that will increase their purchasing power; to promote product research; as well as the transaction of any lawful activity.

STATE OF NEBRASKA

United States of America, } ss.
State of Nebraska }

Secretary of State
State Capitol
Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the
State of Nebraska, do hereby certify that

CONSUMER BENEFITS OF AMERICA

**incorporated on November 3, 2017 and is duly incorporated under the law of
Nebraska;**

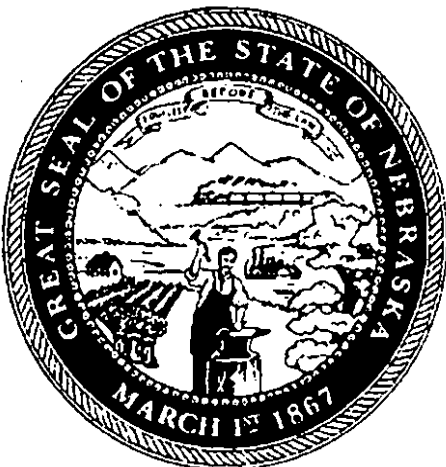
**that all fees, taxes, and penalties owed to Nebraska wherein payment is
reflected in the records of the Secretary of State and to which nonpayment
affects the good standing of the corporation have been paid;**

**that its most recent biennial report required by section 21-19,172 has been
delivered to the Secretary of State;**

that Articles of Dissolution have not been filed.

*This certificate is not to be construed as an endorsement,
recommendation, or notice of approval of the entity's financial
condition or business activities and practices.*

In Testimony Whereof,



I have hereunto set my hand and
affixed the Great Seal of the
State of Nebraska on this date of

May 23, 2024

A handwritten signature in black ink, appearing to read "Robert B. Evnen".

Secretary of State



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:

May 29, 2024 04:00 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

