

TWO-DAY DELIVERY

Executive Secretary RI Public Utilities Commission 89 Jefferson Boulevard Warwick, RI 02888

Re:

Lunar Labs, Inc.

Dear Sir or Madam:

Lunar Labs, Inc., respectfully submits an original and three copies to the Commission, the enclosed package is in reference to Lunar Labs, Inc. CMRS Registration.

Please note that Exhibit "2" to the application, financial statements, contain confidential and proprietary information, and Applicant hereby respectfully requests confidential treatment of such information. A copy of the financial statements is being filed herewith in a separate sealed envelope marked "CONFIDENTIAL".

I have also enclosed an extra copy of this letter to be date stamped and returned to me in the enclosed, self-addressed, postage prepaid envelope.

Please contact me directly if you have any questions or if you require any additional information regarding this filing.

Respectfully Submitted,

Katheren Kenny

Katherine Kennedy

Licensing Analyst GSAssociates, LLC

678-389-4662

Enclosures

RI Public Utilities Commission, 89 Jefferson Boulevard, Warwick, RI 02888 Voice: 401-941-4500 • Email: thomas.kogut@dpuc.ri.gov

Submit Original plus 3 copies of Complete Package AND Check (see 4a or 4b below)

- 1. A telecommunication services supplier must file a Statement of Business Operations ("SBO"), including the following information in a question answer format.
- a. Corporate name, complete address, telephone/fax numbers, e-mail address

Lunar Labs, Inc. DBA Lunar Wireless 206 E Huron St Suite #216 Ann Arbor, MI 48104

b. Local Company name, complete address, telephone/fax numbers, e-mail address

N/A

c. Business locations.

Lunar Labs, Inc. 206 E Huron St Suite #216 Ann Arbor, MI 48104

d. Service agent, complete address, telephone/fax numbers, e-mail address

Cogency Global Inc. 222 Jefferson Boulevard Warwick, RI 02888

e. Attorney of record, complete address, telephone/fax numbers, e-mail address

Gunderson Dettmer Stough Villeneuve Franklin & Hachigian, LLP 201 South Main Street Suite 700
Ann Arbor, MI 48104
Phone: 734-585-2210 | Fax: 734-585-2211
nharley@gunder.com

f. Corporate officers and major stockholders or partners holding a ten percent or greater equity interest.

Hunter Rosenblume, CEO and greater than 10% shareholder Michael Koenig, VP/COO Allan Rothfeder, CFO Saie Rohith Varanasi, greater than 10% shareholder

g. General description of operations.

Lunar Labs offers smartphone service based upon price and superior customer service sold via the internet. Customers provide their own hardware.

h. Description, in detail, of the customer service organization to be employed in serving carriers and end users.

Currently Lunar Labs customer service is managed in house via text, email, or voice. Customer service is currently available Monday through Friday 9am – 5pm EST.

i. Customer service contact, complete address, telephone/fax numbers, e-mail address

1 844-835-8627; sprint-support@joinlunar.com

j. Regulatory contact person, complete address, telephone/fax numbers, e-mail address

Doug Hoff Senior Manager Global Strategic Accountants, LLC 6250 Shiloh Rd. Sulte 110 Alpharetta, GA 30005 (404) 472-6241 Direct (678) 487-8808 Fax doug@gsaudits.com

k. Company web site URL, if available.

www.lunarwireless.com

2. Provide evidence, in exhibit form, of authorization from the Rhode Island Secretary of State, 148 West River St., Providence, RI 02904 (401-222-3040), to do business in Rhode Island. Any filing not including this requirement will be put on hold until the documentation is received or the filling package will be return for deficiencies and supply the "d/b/a name form" from the Secretary of State if using a fictitious name within the state. (see requirements below for this procedure)

See Exhibit 2

- 3. All telecommunication service supplier applicants must file latest company's stated financial position.
- 4.a. Only the CLEC (Class I and Class VI) may file tariffs at a later date; 30 days before commencing operations in the state. Filing must include a **check in the amount of \$300.00**, made payable to "State of Rhode Island".
- 4.b. All non CLEC (Class II, III, IV,V) telecommunication service suppliers filing must include tariffs leaving the effective date BLANK. Filing must also include a **check in the amount of \$300.00**, made payable to "State of Rhode Island".

RI SOS Filing Number: 201752689590 Date: 11/1/2017 12:37:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Certificate of Authority

FOREIGN Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1.2-1405</u>, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:						
Lunar Labs, Inc.						
It is incorporated under the laws of; Delaware						
3. The name, if different, which it elects to use in Rhode Island is:						
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:						
(b) 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:						
4. The date of its incorporation is: 6/8/2015						
And the period of its duration is: CHECK ONLY ONE BOX **Perpetual (on-going)						
Date certain for dissolution						
5. The address of its principal office is:						
3434 Russell St., #406, Detroit, MI 48207						
6. The name and address of the initial registered agent/office of in Rhode Island:						
Agent Name COGENCY GLOBAL INC.						
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard,						
City/Town Warwick S	RHODE ISLAND	Zip Code 0 2888				

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

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FORM 150 - Revised: 08/2016

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:						
Telecommunications						
, 5.5.5						
8. (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):						
NAME	ADDRESS					
Hunter Rosent	nblume 34		34 Russell St.,	34 Russell St., #406, Detroit, MI 48207		
Sai Rohith Var	nith Varanasi 34		34 Russell St., #406, Detroit, MI 48207			
				Check the box to indicate an attachment.		
8. (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):						
OFFICE	NAME			ADDRESS		
PRESIDENT	Hunter Rosenblume		3434 Ru	3434 Russell St., #406, Detroit, MI 48207		
VICE PRESIDENT						
TREASURER						
SECRETARY						
				Check the box to indicate an attachment.		
9. The aggregate number par value, and series, if			issue; itemized by	classes, par value of shares, shares without		
NUMBER OF SHARES	CLASS		SERIES	PAR VALUE OR STATE NO PAR VALUE		
18,350,202	Comm	on		.0001		
3,906,584	Preferr	ed	1	.0001		
1,768,622	Preferr	red 2 .0001		.0001		
480,270	Preferr	ed	3	.0001		
10. (a) Estimate, in doll owned by the corporation				ollars, the value of the corporation's property in Rhode Island during the following year:		
located:	0			0		
Φ		angur phi filia grade Maria Maria and ann	Ψ,			
within this state during th	e following yea	r bears to the value	of all property of th	roperty of the corporation to be located e corporation to be owned during the 00 to obtain the percentage.		

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.			
\$	s			
(c) Estimate, as a percentage , the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.</i> 0 %				
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.				
13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX				
X Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the day of filing)				
Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.				
Type or Print Name of Authorized Officer	Date			
Hunter Rosenblume	10/29/17			
Signature of Authorized Officer of the Corporation				

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LUNAR LABS, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LUNAR LABS, INC." WAS INCORPORATED ON THE EIGHTH DAY OF JUNE, A.D. 2015.

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

R.I. DEPT. OF STATE
BUS SYCS DIV

Authenticati

5.762095 8300

SR# 20176867422

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

Authentication: 203490402

Date: 10-31-17

RI SOS Filing Number: 201752689590 Date: 11/1/2017 12:37:00 PM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

November 01, 2017 12:37 PM

Nellie M. Gorbea Secretary of State

Tullin U. Koler

