Filing Fee: \$50.00

1D Number: 00) 61942



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

2018 MAY 1	SECRETARY OF STATE CORPERATIONS DIV
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CERTIFICATE OF CORRECTION

Pursuant to the provisions of Section 7-1.2-105 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation hereby submits the following Certificate of Correction:

1.	KAISOS TEANS POSTA CION IN				
2.	The document to be corrected is Articles OF INCORPORATION				
3.	The document being corrected was originally filed on				
4.	Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgement:				
	please semore Oliver De Jesus From the papernork				
	as an incorporator. In Section 7				
	OLIVER DE Jesus 35 Williston way Pawtucket				
	- W86				
5.	The corrected portion of the document states as follows:				
	IN section 6 The collect Incoepolatoes				
	listed.				
3.	The document attached to this certificate is the corrected document.				
7.	This Certificate of Correction shall be effective upon filing unless a specified date is provided which shall be no later than the 90 th day after the date of this filing				
	Under penalty of perjury, I declare and affirm that I have				
	examined this Certificate of Correction, including any accompanying attachments, and that all statements contained				
	herein are true and correct				
Dat	e: 5/11/16 Signature of Authorized Officer of the Corporation				
	FILED Signature of Authorized Officer of the Corporation				
Grn	MAY 11 2016 Type or Print Name of Authorized Officer				
	sed: 12/05				

A.A-9:10A.M.



State of Rhode Island and Providence Plantations **Department of State - Business Services Division**

148 W. River Street, Providence, Rhode Island 02904-2615 **Phone:** (401) 222-3040 | **Email:** corporations@sos.ri.gov | **Website:** www.sos.ri.gov

Article of Incorporation Domestic Business Corporation

J	Filing Fee: \$230.00 minimum					
The undersigned acting as incorporator(s)	of the corporation under RIGL <u>7-1.2</u>	, adopt(s) the following Articles of				
Incorporation for such corporation:						
1. The name of the corporation is:						
KAITOS Transport	TATION INC					
Is this a close corporation pursuant to RIGL <u>7-1.2-1701</u> of the General Laws, 1956, as amended? XYes No						
2. The total number of shares which the corporation has the authority to issue is: (Unless otherwise stated, all authorized shares are deemed to have a nominal or par value of \$0.01 per share.)						
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share				
500	STK	B 0.0000				
If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them which are permitted by the provisions of RIGL 7-1.2. State any provisions here (optional): Check the box to indicate an attachment.						
3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Ramon Aponte Street Address (NOT a P.O. Box)						
Street Address (<u>NOT</u> a P.O. Box) 35 WII)15 tow Wr City/Town	+y					
City/Town SAW tucket	State RHODE ISLAND	Zip Code				
4. The corporation has the purpose of eng dissolved or terminated in accordance wit		hall have perpetual existence until				

5. Additional provisions, if any, not inco Articles of Incorporation:	onsistent with RIGL <u>7</u> -	-1.2 which the inco	rporators elect to have set forth in these			
6. The name and address of each inco	orporator is:	Ch	eck the box to indicate an attachment.			
		Address 35 WIIIISTON WAY Zip Code 02861				
Name Ramon Aponte City/Town BANTUKET Name VIRGEN BORGES City/Town	State R. I		Zip Code 02861			
Name VIRGEN BORGES		Address 35 WI)	hston WAY			
City/Town SAWTUCKET	State R.J		Zip Code			
Name		Address				
City/Town	State		Zip Code			
7. Date when these Articles of Incorpor	ation will be effective	: CHECK ONLY ON	NE BOX			
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/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.						
Signature of Incorporator	Date 5/11/16					
Signature of Incorporator SIGN DOCL Vison Bosol	5/11/16 Date 5/11/16					
Signature of Incorporator SIGN DOCL	JMENT HERE		Date			

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.

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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

