

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

BENEFIT CORPORATION ARTICLES OF INCORPORATION

Filing and License Fee: \$230.00 minimum

The undersigned acting as incorporator(s) of a	a benefit corporation under Chapters 7-5.3 and 7-1.2 o	of the General Laws of Rhode
Island, 1956, as amended, adopt(s) the following	ing Articles of Incorporation for such corporation:	· · · · · · · · · · · · · · · · · · ·
1. The name of the corporation is:	ine Technology Center,	Ltd
This is a close corporation pursuant to §7-1.2	2-1701 of the General Laws, 1956, as amended. (Check if in	applicable.)
2. This is a benefit corporation organized to compare the purposes set forth in 7-1.2-301 and 7-5.3-	reate a general public benefit. The following specific policy. Gai: The promotion and additional in the marine industry of the proposes are to be deglared.	vancement of ty for the
3. The total number of shares which the corporate	NONE" if no specific benefit purposes are to be deplaced pration has the authority to issue is: ares are deemed to have a nominal or par value of \$0.	
(a) If only one class: Total number of shares _		, , , , , , , , , , , , , , , , , , ,
	<u>or</u>	
or restrictions of them, which are permitted by the classes of shares of the corporation and the fixing	hares of each class	amended, in respect of any class or
· · · · · · · · · · · · · · · · · · ·		
4. The address of the initial registered office o	f the corporation is:	
Street Address (<u>NOT</u> a P.O. Box) 15 7 (Arris	on Ave, Suite 29	
City/Town VenponT	State RHODE ISLAND	Zip Code 02840
and the name of the initial registered agent at	such address is:	
Agent Name KALL W.	Olsen	

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5. The corporation shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-1.2.					
6. Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.					
7. The fiscal year end of the corporation:	Lune 30)			
			ors elect to have set forth in these Articles of		
9. The name and address of each incorporator is:					
Name KAFL W. Olsen 157 Harrison Ave Suite 29					
City/Town Vew Dort	State RT		Zip Code / 0 2 8 4 0		
Name		Address			
City/Town	State		Zip Code		
Name		Address			
City/Town	State	`	Zip Code		
10. Date when these articles of incorporation will be effective: CHECK ONE BOX ONLY					
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 accompanying attachments, and that all sta					
Signature of Incorporator		Date			
Signature of Incorporator		Date			
Signature of Incorporator		Date			

Form No. 114 Revised: 07/2013 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

