

Incorporation for such corporation:

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

Articles of Incorporation Business Corporation Filing Fee: \$230.00 minimum

The undersigned acting as incorporator(s) of the corporation under RIGL 7-1.2, adopt(s) the following Articles of

| 1. The name of the corporation is: | | |
|--|---|---|
| RALPH LaRAE HAIR DESIGN, INC | | |
| Is this a close corporation pursu | ant to <u>RIGL 7-1.2-1701</u> of the Genera | I Laws, 1956, as amended? ☑ Yes 🔲 No |
| 一、1、1、1、2、2、2、1、1、1、1、1、1、1、1、1、1、1、1、1、 | the corporation has the authority to is rized shares are deemed to have a no | sue is: (RIGL 7-1,2-605) ominal or par value of \$0,01 per share.) |
| Total Authorized Shares (Number of Shares) | Class of Stock | Par Value Per Share |
| 1,000 | COMMON | NO PAR VALUE |
| | - | |
| | | d the power, preferences, and rights, including repermitted by the provisions of RIGL 7-1.2. Check this box to indicate an attachment. |
| 3 The name and address of the initia | ıl registered agent/office of the corpor | ation is: |
| Agent Name MARIO J. CARNEIRO | an egiote i da egipti e i da e e e e e e e e e e e e e e e e e e | 4.00 |
| Street Address (NOT a P.O. Box) 577 | WARREN AVENUE | |
| City/Town EAST PROVIDENCE | State RHODE ISLAND | Zip Code 02914 |
| 4. The corporation has the purpose o | | d shall have perpetual existence until |

Form No. 100 Revised: 2015 FILED

| Articles of Incorporation: NONE | | agkagan ngama ini ki meraki hagan ini gal | |
|--|-----------------------------|---|--|
| | | | |
| n | | | Check this box to indicate an attachment. |
| 6. The name and address of each | incorporator is: (RIGL 7-1 | .2-201) Address | |
| Name BEVERLY C. MORRIS | | 280 DODGE STREET | |
| City/Town EAST PROVIDENCE | State RHODE ISLA | ND | Zip Code 02914 |
| Name | | Address | • |
| City/Town | State | | Zip Code |
| Name | | Address | |
| City/Town | State | | Zip Code |
| 7. Date when these Articles of Incor | poration will be effective: | CHECK ONL | YONEBOX |
| ☐ Date received (Upon filing) ✓ Later effective date (Date must | t be no more than 90 day | s from the day | y of filing) JANUARY 4, 2016 |
| Under penalty of penjury, I/we declar | e and affirm that I/we ha | ve examined i | these Articles of Incorporation, Including any |
| accompanying attachments, and the Signature of Incorporator | it an statements contains | a nerem are u | Date |
| 8 Dew | Mar | | DECEMBER 23, 2016 |
| Signature of Incorporator | | | Date |
| | | | |
| Signature of Incorporator | | | 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

