



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$10.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Non-Profit Corporation  
Restated Articles of Incorporation

(Section 7-6-42 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the corporation is C.O.R.E. Development Institute, Inc.

If the entity's name is changing, state the new name: C.O.R.E. Development Institute, Inc.

ARTICLE II

If the corporate duration is changing, so state:  Perpetual

If the corporate purpose is changing, so state:

C.O.R.E. DEVELOPMENT INSTITUTE FOCUSES ON HIGH IMPACT INITIATIVES IN URBAN AND IMMIGRANT COMMUNITIES, DOMESTICALLY AND INTERNATIONALLY, THAT WILL PROMOTE GROWTH AND DEVELOPMENT OF HUMAN, FINANCIAL, EDUCATIONAL AND OTHER PHYSICAL RESOURCES AS WELL AS INCREASE ACCESS TO THOSE RESOURCES FOR COMMUNITY MEMBERS.CDI LOOKS TO PROVIDE COMMUNITY MEMBERS AND STAKEHOLDERS WITH SUSTAINABLE INITIATIVES THAT WILL ALSO DEVELOP FUTURE LEADERS AND SERVE AS A LONG TERM CATALYST IN SUPPORTING EFFORTS TO ENHANCE AND INNOVATE AREAS OF THE COMMUNITY VITAL TO THE WELLBEING OF INDIVIDUALS AND FAMILIES IN THAT COMMUNITY.CDI PLANS TO ACCOMPLISH THESE GOALS THROUGH VARIOUS ACTIVITIES AND EVENTS CENTERED ON COMMUNITY ENGAGEMENT & LEADERSHIP OPPORTUNITIES FOR YOUTH, COMMUNITY MEMBERS AND AGENCIES, COMMUNITY EVENTS THAT FOCUS ON MENTORING AND LIFE SKILL DEVELOPMENT, FUND RAISING EFFORTS FOR PURPOSES OF ENHANCING TECHNOLOGICAL INFRASTRUCTURE AND EDUCATIONAL RESOURCES IN URBAN SCHOOLS AND COMMUNITY CENTERS, AND THROUGH THE CREATION OF SCHOLARSHIP OPPORTUNITIES FOR YOUTH.

If there is a change in the number of directors, modify this section:

The number of directors constituting the Board of Directors of the Corporation is 4

and the names and addresses of the persons who are to serve as the directors are:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
INCORPORATOR	AMARILDO BARBOSA	20 FOREST AVENUE CUMBERLAND, RI 02864 USA
DIRECTOR	AMARILDO BARBOSA	20 FOREST AVENUE CUMBERLAND, RI 02864 USA

DIRECTOR	PAULO PINA	20 FOREST AVENUE CUMBERLAND, RI 02864 USA
DIRECTOR	JAMES AVELAR	20 FOREST AVENUE CUMBERLAND, RI 02864 USA
DIRECTOR	KEVIN AVELAR	20 FOREST AVENUE CUMBERLAND, RI 02864 USA

If there are any other provisions to be restated, so state:

IF VOLUNTARY DISSOLUTION PROCEEDINGS HAVE NOT BEEN REVOKED, THEN WHEN ALL DEBTS, LIABILITIES, AND OBLIGATIONS OF THE CORPORATION HAVE BEEN PAID AND DISCHARGED, OR ADEQUATE PROVISION HAS BEEN MADE FOR THEM, AND ALL OF THE REMAINING PROPERTY AND ASSETS OF THE CORPORATION HAVE BEEN TRANSFERRED, CONVEYED, OR DISTRIBUTED IN ACCORDANCE WITH THE PROVISIONS OF THIS CHAPTER AND FOR EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, ARTICLES OF VOLUNTARY DISSOLUTION SHALL BE EXECUTED BY THE CORPORATION BY ITS PRESIDENT AND OFFICERS OF THE CORPORATION, AND SHALL SET FORTH:

1. THE NAME OF THE CORPORATION.

2. BECAUSE THERE ARE NO MEMBERS IN THE CORPORATION, A STATEMENT OF THE FACT, THE DATE OF THE MEETING OF THE BOARD OF DIRECTORS AT WHICH THE RESOLUTION TO DISSOLVE WAS ADOPTED AND A STATEMENT OF THE FACT THAT THE RESOLUTION RECEIVED THE VOTE OF A MAJORITY OF THE DIRECTORS IN OFFICE, WHICH REQUIRES AT LEAST 70 PERCENT OF THE VOTING BOARD MEMBERS PRESENT.

3. THAT ALL DEBTS, OBLIGATIONS, AND LIABILITIES OF THE CORPORATION HAVE BEEN PAID AND DISCHARGED OR THAT ADEQUATE PROVISION HAS BEEN MADE FOR THEIR PAYMENT.

4. A COPY OF THE PLAN OF DISTRIBUTION AS ADOPTED BY THE CORPORATION, OR A STATEMENT THAT NO PLAN WAS ADOPTED.

5. THAT ALL THE REMAINING PROPERTY AND ASSETS OF THE CORPORATION HAVE BEEN TRANSFERRED, CONVEYED, OR DISTRIBUTED IN ACCORDANCE WITH AND AS DEFINED BY THE STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS.

6. THAT THERE ARE NO SUITS PENDING AGAINST THE CORPORATION IN ANY COURT, OR THAT ADEQUATE PROVISION HAS BEEN MADE FOR THE SATISFACTION OF ANY JUDGMENT, ORDER, OR DECREE WHICH MAY BE ENTERED AGAINST IT IN ANY PENDING SUIT.

### ARTICLE III

The Restated Articles were adopted in the following manner:

**(check one box only)**

The articles and/or amendment(s) were adopted at a meeting of members held on , at which meeting a quorum was present, and the correction received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.

The articles and/or amendment(s) were adopted by a consent in writing on , signed by all members entitled to vote with respect thereto.

The articles and/or amendment(s) were adopted at a meeting of the Board of Directors held on , and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

**ARTICLE IV**

Briefly describe amendments in the space below. If there are no such amendments, state "NONE":

**ARTICLE V**

These Restated Articles of Incorporation correctly set forth without change the corresponding provisions of the Articles of Incorporation, as previously amended, and the restated articles of incorporation, together with the designated amendments, if any, supersede the original articles of incorporation and all previous amendments to the articles of incorporation.

**ARTICLE VI**

Date when restated article is to become effective 2/10/2016  
(not prior to, nor more than 30 days after, the filing of these Articles of Amendment)

**Signed this 9 Day of February, 2016 at 11:43:10 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

C.O.R.E. Development Institute, Inc.  
Corporate Name

By AMARILDO BARBOSA

President or  Vice President (check one)

**AND**

By PAULO PINA

Secretary or  Assistant Secretary (check one)

Form No. 202  
Revised 09/07



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

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:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

