

## 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

SECRETARY OF STATE CORPORATIONS DIV

## 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

Incorporation for such corporation:	.,				
1. The name of the corporation is:					
Fara's Plumi	ama Corp				
ls this a close corporation pursuar	nt to RIGL 7-1.2-1701 of the General L	aws, 1956, as amended?	Yes) No		
2. The total number of shares which the (Unless otherwise stated all authorizes)	e corporation has the authority to issu sed shares are deemed to have a nom		share.)		
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Sha	are		
	Common Stock	BI.M per Stock	<u>-</u>		
If you desire, you may include a stateme voting rights, and the qualifications, limita State any provisions here (optional):	ations, or restrictions of them which are		GL 7-1.2.		
3. The name and address of the initial registered agent/office of the corporation is:					
Agent Name Paul	Speteluna S				
Street Address ( <u>NOT</u> a P.O. Box)	nuxxxx Drive				
City/Town JUNISTON	State RHODE ISLAND	Zip Code	19		
4. The corporation has the purpose of a dissolved or terminated in accordance		shall have perpetual existence	until		

MAR 2 5 2016

FILED <

d. 271P

//:3/

Form No. 100 Revised: 2015

5. Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these					
Articles of Incorporation:	Disistent with NIGE 7	<u>-1.2</u> Which the jiico	rporators elect to have set forth in these		
		Che	eck this box to indicate an attachment.		
6. The name and address of each incorporator is: (RIGL 7-1.2-201)					
Name Paul J. Spele	LUNGS	Address	nuxod Drive		
City/Town	State		Zip Code		
Name	<b>V</b>	Address			
City/Town	State	<u> </u>	Zip Code		
•					
Name		Address			
	·				
City/Town	State		Zip Code		
		CUTCK ONLY OF			
7. Date when these Articles of Incorporation will be effective: CHECK ONLY ONE 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	Λ		Date		
Harf Sol	The state of the s	*	3-26-16		
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.