



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

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2016 APR 18 AM 11:04

**Articles of Incorporation**  
**Non-Profit Corporation**  
Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL 7-6-34, adopt(s) the following Articles of Incorporation for such corporation:

<b>1. The name of the corporation is:</b>		
Aime J Forand Tenants Association		
<b>2. The period of its duration is: CHECK ONLY ONE BOX</b>		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
<b>3. The specific purpose or purposes for which the corporation is organized are:</b>		
To assist Elderly and Disabled Tenants, and be able to have different events throughout the year.		
<input type="checkbox"/> Check box for attachment		
<b>4. Provisions, if any, not inconsistent with the law, which the incorporators elect to set forth in these articles of incorporation for the regulation of the internal affairs of the corporation are:</b>		
<input type="checkbox"/> Check box for attachment		
<b>5. Name and address of the initial registered agent/office in Rhode Island is:</b>		
Name Mary L Melillo		
Street Address (NOT a P.O. Box) 11 Forand Circle apt B		
City Johnston	State RHODE ISLAND	Zip Code 02919

**FILED**

APR 18 2016

BY LL 272477  
11:04

6. The number of the initial Board of Directors of the Corporation is 4 (not less than 3 directors) and the names and address of the persons who are to serve as the initial directors are:

NAME	ADDRESS
Mary L Melillo	11 B Fornad Circle Johnston, RI 02919
Janice Grande	23 B Forand Circle Johnston, RI 02919
Natalie Cardinal	21 B Forand Circle Johnston, RI 02919
Beverly Williams	12 C Forand Circle Johnston, RI 02919

If more space is required, please list on separate attachment.

☐ Check box for attachment

7. The name and address of each incorporator is:

NAME	ADDRESS
Mary L Melillo	11 Forand Circle Johnston, RI 02919

If more space is required, please list on separate attachment.

☐ Check box for attachment

8. Date when these articles will be effective: **CHECK ONLY ONE BOX**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 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 <i>Mary L. Melillo</i> SIGN DOCUMENT HERE	Type or Print Name of Incorporator Mary L. Melillo	Date 4-14-16
Signature of Incorporator SIGN DOCUMENT HERE	Type or Print Name of Incorporator	Date
Signature of Incorporator SIGN DOCUMENT HERE	Type or Print Name 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](mailto:corporations@sos.ri.gov).



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:

Nellie M. Gorbea  
*Secretary of State*

