

Articles of Incorporation

DOMESTIC 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:

The name of the corporation is:			
New Horizons Recovery Housing, In	nc.		
Is this a close corporation pursuant	to RIGL <u>7-1.2-1701</u> of the General L	aws, 1956, as amended? X Yes No	_
2. The total number of shares which th	e corporation has the authority to iss		
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
1000	Commom	No par	
			-
			-
If you desire, you may include a stateme voting rights, and the qualifications, limits State any provisions here (optional):	ent of all or any of the designations and ations, or restrictions of them which are	the power, preferences, and rights, including e permitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment.	
Reserved			
3. The name and address of the initial	registered agent/office in Rhode Islan	nd is:	
Agent Name Alfred A. Veltri, Esq.			
Street Address (NOT a P.O. Box) 331	Broadway		
City/Town Providence	State RHODE	Zip Code 02909	
4. The corporation has the purpose of or terminated in accordance with RIGI		d shall have perpetual existence until dissolve	d

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

JUL 19 2016 10:32

5 Additional provisions if any not inconsistent with	DIOL 7 4 O WALLE HE STORE	
Additional provisions, if any, not inconsistent with Articles of Incorporation:	, RIGL <u>7-1,2</u> which the incor	rporators elect to have set forth in these
Reserved		
Keselved		
	1	Check the box to indicate an attachment.
6. The name and address of each incorporator is:		THEOR THE DOX TO HIMIDATE OH ALLACOTHER.
Name	Address	
Jasmin DiMaio	86 Erie Sti	reet
City/Town	State	Zip Code
Providence	RI	02908
Name	Address	
City/Town	State	Zip Code
		Zip Gode
Name	Address	
City/Town	State	Zip Code
7. Date when these Articles of Incorporation will be en	- CHECK ONLY ON	
X Date received (Upon filing)	RECTIVE: UNEUN UNLT UNI	E BOX
<u> </u>	والمراجع المراجع المرا	
Later effective date (Date must be no more than		
Under penalty of perjury, I/we declare and affirm that accompanying attachments, and that all statements of	I/we have examined these contained herein are true a	Articles of Incorporation, including any and correct.
Type or Print Name of Incorporator		Date
Tremin DiMain		
Signature of Incorporator	<u></u>	7-19-2016
Janui D Man	DOCUMENT HERE	
Type or Print Name of Incorporator	-	Date
Signature of Incorporator		
	DOCUMENT HERE	
Type or Print Name of Incorporator		Date
20.00		
Signature of Incorporator SIGN [DOCUMENT HERE	
	~ () () () () () () () () () (

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

