

## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

The undersigned acting as incorporator(s) of the corporation under RIGL  $\underline{7-1.2}$ , adopt(s) the following Articles of Incorporation for such corporation:

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1. The name of the corporation is:			
O & J TRUCKING, INC			
Is this a close corporation pursuant to	RIGL 7-1.2-1701 of the General La	aws, 1956, as amended? 🔀 Yes 🔲 No	
2. The total number of shares which the	corporation has the authority to issu	sue is: ominal or par value of \$0.01 per share.)	
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
1000	COMMON PAR VALUE	10.00	
If you desire, you may include a statement voting rights, and the qualifications, limitations state any provisions here (optional):	of all or any of the designations and ons, or restrictions of them which are	I 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.	
3. The name and address of the initial re	gistered agent/office in Rhode Islai	and is:	
Agent Name JOSUE O URAN			
Street Address (NOT a P.O. Box) 383 HU	JNT STREET 1ST FL		
City/Town CENTRAL FALLS	State RHODE	E ISLAND Zip Code 02863	
4. The corporation has the purpose of er or terminated in accordance with RIGL 7	ngaging in any lawful business, and -1.2.	d shall have perpetual existence until dissolve	

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

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BY On 279739

FORM 100 - Revised: 05/2016

5. Additional provisions, if any, not inconsistent with RIGL <u>7-1.2</u> which the incorporators elect to have set forth in these Articles of Incorporation:					
		•			
	Check the b	ox to indicate an attachment.			
6. The name and address of each incorporator is:					
Name JOSUE O URAN	Address 383 HUNT STREET 1ST FLOOR				
City/Town CENTRAL FALLS	State RI	Zip Code <b>02863</b>			
Name	Address				
City/Town	State	Zip Code			
Name	Address				
City/Town	State	Zip Code			
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.					
Type or Print Name of Incorporator	ou norom are the and correct.	Date			
JOSUE O URAN		07/22/2016			
Signature of Incorporator  SIGN DOCUMENT HERE					
Type of Print Name of Incorporator		Date			
Signature of Incorporator SIGN DOCUMENT HERE					
Type or Print Name of Incorporator		Date			
Signature of Incorporator SIGN DOC	UMENT 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

