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State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Articles of Incorporation
DOMESTIC 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:

1. The name of the corporation is:

THE PRISON BRIDGE PROGRAM

2. The period of its duration is: CHECK ONLY ONE BOX

☑ Perpetual (on-going)

☐ Date certain for dissolution _____

3. The specific purpose or purposes for which the corporation is organized are:

TO INCREASE POST SECONDARY GRADUATION RATES AMONG FORMERLY & CURRENTLY INCARCERATED INDIVIDUALS

Check the box to indicate an attachment. ☐

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:

TO BE AMENDED UPON FIRST BOARD MEETING.

Check the box to indicate an attachment. ☐

5. Name and address of the initial registered agent/office in Rhode Island is:

Name: JAMES A. MONTEIRO

Street Address (NOT a P.O. Box): 16 DUNCAN AVE

City	State	Zip Code
PROVIDENCE	RHODE ISLAND	02906

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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BY 12718246

FORM 200 - Revised: 05/2016

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

NAME	ADDRESS
VINNIE VELAZQUEZ	66 BURNETTE ST. PROV RI 02907
HERMAN FALU	66 BURNETTE ST. PROV. RI 02907
LUIS ESTRADA	70 DUNCAN AVE. PROV. RI 02906

Check the box to indicate an attachment. ☐

7. The name and address of each incorporator is:

NAME	ADDRESS
JAMES MONTEIRO	116 DUNCAN AVENUE PROV. RI 02906

Check the box to indicate an 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.

Type or Print Name of Incorporator	Date
JAMES MONTEIRO	11-2-16

Signature of Incorporator

SIGN DOCUMENT HERE

James Monteiro

Type or Print Name of Incorporator	Date

Signature of Incorporator

SIGN DOCUMENT HERE

Type or Print Name of Incorporator	Date

Signature of Incorporator

SIGN DOCUMENT HERE

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.

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:

November 02, 2016 2:50 PM

Nellie M. Gorbea
Secretary of State

144562-1-1148944