

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



2017 FEB - 3 PM 12: 19

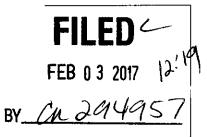
## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

1. The name of the corporation is:		······································	
TAS, INC.			
Is this a close corporation pursua	Int to RIGL 7-1.2-1701 of the General La	ws, 1956, as amended? 🔲 Yes 🖌 No	
	the corporation has the authority to issu orized shares are deemed to have a nor		
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
1,000	Common	No Par Value	
voting rights, and the qualifications, lin	nent of all or any of the designations and t nitations, or restrictions of them which are	he power, preferences, and rights, including permitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment.	
voting rights, and the qualifications, lir State any provisions here ( <i>optional</i> ):	nent of all or any of the designations and t nitations, or restrictions of them which are al registered agent/office in Rhode Islan	permitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment.	
voting rights, and the qualifications, lir State any provisions here ( <i>optional</i> ): 3. The name and address of the initi Agent Name Thomas E. Wright, Es	nitations, or restrictions of them which are al registered agent/office in Rhode Islan	permitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment.	
voting rights, and the qualifications, lir State any provisions here ( <i>optional</i> ): 3. The name and address of the initi	nitations, or restrictions of them which are al registered agent/office in Rhode Islan	permitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment.	

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



FORM 100 - Revised: 07/2016

5. Additional provisions, if any, not inconsistent with RI Articles of Incorporation:	IGL <u>7-1.2</u> which the inc	orporators elect to have set forth in these		
		Check the box to indicate an attachment.		
6. The name and address of each incorporator is:				
Name Kenneth D. Santos	Address 37 Rzy	Address 37 Rzymad Stud		
City/Town Providence	State RI	Zip Code U7018		
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		Date F.J- 3 2017		
Kenneth D. Santos		1		
Signature of Incorporator SIGN DOCUMENT HERE				
Type or Print Name of Incorporator		Date		
Signature of Incorporator SIGN D	DOCUMENT HERE	<u> </u>		
Type or Print Name of Incorporator		Date		
Signature of Incorporator SIGN E	DOCUMENT HERE			



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:

Tulli U. Hole

Nellie M. Gorbea Secretary of State

