## R.I. DEPT. OF STATE BUS SVCS DIV

## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

The undersigned acting as incorporator(s) of the corporation under RIGL <u>7-1.2-202</u>, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is:				
MEDIFLOR ORGANICS, INC.				
Is this a close corporation pursuant to R	IGL <u>7-1.2-1701</u> o	f the General Laws, 1956,	as amended? V Yes No	
2. The total number of shares which the cor (Unless otherwise stated, all authorized s	•		er value of \$0.01 per share.)	
Total Authorized Shares (Number of Shares)	Class of	Stock	Par Value Per Share	
1000			0.01	
If you desire, you may include a statement of voting rights, and the qualifications, limitations State any provisions here (optional):		them which are permitted I		
3. The name and address of the initial registered agent/office in Rhode Island is:				
Agent Name PETER PETRARCA, ESQ				
Street Address (NOT a P.O. Box) 330 SILVE	ER SPRING ST			
City/Town PROVIDENCE		State RHODE ISLAND	Zip Code 02904	
4. The corporation has the purpose of engagor terminated in accordance with RIGL 7-1.		I business, and shall have	perpetual existence until dissolved	

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 297032

5. Additional provisions, if any, not inconsistent with Articles of Incorporation:	RIGL <u>7-1.2</u> which the incorp	porators elect to have set forth in these		
	C	check the box to indicate an attachment.		
6. The name and address of each incorporator is:	T	_		
Name PETER PETRARCA, ESQ	Address 330 SILV	Address 330 SILVER SPRING ST		
City/Town PROVIDENCE	State RI	Zip Code <b>02904</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		Date		
Peter Petreven 2/28/17				
Signature of Incorporator  SIGN FOCUMENT HERE				
Type or Print Name of Incerporator		Date		
Signature of Incorporator	OOCUMENT HERE			
Type or Print Name of Incorporator		Date		
Signature of Incorporator				