RI SOS Filing Number: 201737455240 Date: 2/17/2017 9:55:00 AM



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Articles of Incorporation

DOMESTIC Business Corporation

→ Filing Fee: \$230.00 minimum

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

The name of the corporation is:		
APEX HOME INSPECTION SERV	VICE, INC.	
Is this a close corporation pursuant to	RIGL 7-1.2-1701 of the General Laws	s, 1956, as amended? Yes No
The total number of shares which the a (Unless otherwise stated, all authorize)		
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
1,000	COMMON	NO PAR VALUE
If you desire, you may include a statement ovoting rights, and the qualifications, limitation state and provisions have (autisms).	of all or any of the designations and the ons, or restrictions of them which are pe	mitted by the provisions of RIGL 7-1.2.
State any provisions here (optional):		Check the box to indicate an attachment.
3. The name and address of the initial reg	ristered agent/office in Rhode Island is	<u>. </u>
Agent Name Edward J. DiMartine		,
Street Address (<u>NOT</u> a P.O. Box)	Phenix Avenue	
City/Town Cranston	State RHODE IS	Zip Code 02920
4. The corporation has the purpose of engor terminated in accordance with RIGL 7-	gaging in any lawful business, and sha 1.2.	Il 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 2410035 A.A. 9:55 A.M

Additional provisions, if any, not inconsistent with R Articles of Incorporation:	IGL <u>7-1,2</u> which the incorpo	orators elect to have set forth in these	
C. The name and address of each incomments in	Ch	neck the box to indicate an attachment.	
The name and address of each incorporator is: Name	Address		
Edward J. DiMartino, Jr., Esq., CPA	141 Phenix Avenue		
City/Town Cranston	State RI	Zip Code 02920	
Name	Address		
City/Town	State	Zip Code	
Name	Address		
City/Town	State	Zip Code	
7. Date when these Articles of Incorporation will be effe	ective: CHECK ONLY ONE	BOX	
✓ Date received (Upon filing)			
Later effective date (Date must be no more than 9	00 days from the day of filing	ng)	
Under penalty of perjury, I/we declare and affirm that I/ accompanying attachments, and that all statements co	we have examined these A Intained herein are true and	Articles of Incorporation, including any discorrect.	
Type or Print Name of Incorporator	Date		
Edward J. DiMartino, Jr., Esq., CPA	02/17/17		
Signature of Incorporator	OCUMENT HERE		
Il Me Me	7000MEIVT TREINE		
Type or Print Name of Incorporator		Date	
Signature of Incorporator	OCUMENT HERE		
OIOIVE			
Type or Print Name of Incorporator		Date	
Signature of Incorporator	OCUMENT HERE		
	SA SO RESPONDENCE OF TRUE NO.		

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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:

February 17, 2017 09:55 AM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

