

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:

R.I. DEPT. OF STATE BUS SYCS DIV

adopt(s) the following Articles of Incorpora 1. The name of the corporation is:	nion for sacri corporation.		
,	lm a		
CANNA PHARM RI,	inc.		
Is this a close corporation pursuant to	RIGL 7-1.2-1701 of the General La	aws, 1956, as amended? Yes No	
The total number of shares which the (Unless otherwise stated, all authorize)		ue is: minal or par value of \$0.01 per share.)	
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
THREE HUNDRED	COMMON	NO PAR VALUE	_
			_
··			_
If you desire, you may include a statement voting rights, and the qualifications, limitation		the power, preferences, and rights, including	
State any provisions here (optional):	ons, or resulctions of them which are	Check the box to indicate an attachment.	
		GENERALLY TO DO EVERYTHING DONE	:
BY THOSE ENGAGED IN A SIMILAR L	INE OF BUSINESS		
3. The name and address of the initial reg	gistered agent/office in Rhode Islan	nd is:	
Agent Name A J BROSCO, ESQ			
Street Address (NOT a P.O. Box) 312 SO	UTH MAIN STREET		
City/Town PROVIDENCE	State RHODE	Zip Code 02903	
		shall have perpetual existence until dissolve	∍d
or terminated in accordance with RIGL 7-	<u>1.2</u> .		

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 - 9:24

BY Ca 300387

5. Additional provisions, if any, not inconsistent with Articles of Incorporation:	RIGL <u>7-1.2</u> which the incorporator	s elect to have set forth in these
	Obselva	
The name and address of each incorporator is:	Спеск и	he box to indicate an attachment.
Name A J BROSCO	Address 312 SOUTH MAIN STREET	
City/Town PROVIDENCE	State RHODE ISLAND	Zip Code 02903
Name	Address	
City/Town	State	Zip Code
Name	Address	
City/Town	State	Zip Code
7. Date when these Articles of Incorporation will be e	ffective: CHECK ONLY ONE BOX	
✓ Date received (Upon filing) Later effective date (Date must be no more than	1 90 days from the day of filing)	
Under penalty of perjury, I/we declare and affirm that accompanying attachments, and that all statements of	I/we have examined these Article contained herein are true and corr	s of Incorporation, including any ect.
Type or Print Name of Incorporator		Date
A J BROSCO		4/6/17
Signature of Incorporator	jan Karayta osak	
Type of Print Name of Incorporator		Date
Signature of Incorporator		
Type or Print Name of Incorporator		Date
Signature of Incorporator	-	