



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

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 R.I. DEPT. OF STATE  
 BUS. SVCS. DIV.  
 2017 MAY 11 AM 9: 8

**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:<br><br><div style="font-size: 1.5em; margin-left: 40px;">R4APurpose</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                               |                                                                           |
| 2. The period of its duration is: CHECK ONLY ONE BOX<br><input checked="" type="checkbox"/> Perpetual (on-going)<br><input type="checkbox"/> Date certain for dissolution _____                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                               |                                                                           |
| 3. The specific purpose or purposes for which the corporation is organized are:<br><div style="font-family: cursive; margin-left: 40px;">                         To assist people in the community by provided a service, in return the customer donates items and articles upto a maximum then 500 to then use as a deduction while allowing others to repurpose said items for new or same intent as previously used.                     </div> <div style="text-align: right; margin-top: 10px;">                         Check the box to indicate an attachment. <input type="checkbox"/> </div> |                                                                               |                                                                           |
| 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:<br><br><br><div style="text-align: right; margin-top: 10px;">                         Check the box to indicate an attachment. <input type="checkbox"/> </div>                                                                                                                                                                                                                                   |                                                                               |                                                                           |
| 5. Name and address of the initial registered agent/office in Rhode Island is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                               |                                                                           |
| Name<br><div style="font-size: 1.2em; margin-left: 40px;">Jodyn Clarke Jacyln</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |                                                                           |
| Street Address (NOT a P.O. Box)<br><div style="font-size: 1.2em; margin-left: 40px;">4 Alma Ave</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                               |                                                                           |
| City<br><div style="font-size: 1.2em; margin-left: 40px;">Bristol</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State<br><div style="font-size: 1.2em; margin-left: 40px;">RHODE ISLAND</div> | Zip Code<br><div style="font-size: 1.2em; margin-left: 40px;">02809</div> |

**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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MAY 11 2017

BY 303392  
A.A. 9:18 A.M.

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                         |
|------------------|---------------------------------|
| Jaclyn Clarke    | 4 Alma Ave Bristol RI 02809     |
| Robert St Angelo | 340 State St. Bristol RI 02809  |
| Donna Pontes     | 39 R State St. Bristol RI 02809 |
|                  |                                 |

Check the box to indicate an attachment. ☐

7. The name and address of each incorporator is:

| NAME              | ADDRESS                         |
|-------------------|---------------------------------|
| Jaclyn Clarke     | 4 Alma Ave Bristol RI 02809     |
| Robert St. Angelo | 340 State St. Bristol RI 02809  |
| Donna Pontes      | 39 R State St. Bristol RI 02809 |
|                   |                                 |

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 |
|------------------------------------|------|

Signature of Incorporator

SIGN DOCUMENT HERE

5/11/17

Type or Print Name of Incorporator

Date

Jaclyn Clarke

5/11/17

Signature of Incorporator

SIGN DOCUMENT HERE

Donna Pontes

Donna Pontes

Type or Print Name of Incorporator

Date

Robert St. Angelo

5/11/17

Signature of Incorporator

SIGN DOCUMENT HERE

Robert St Angelo



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:

May 11, 2017 09:18 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

