

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

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

R.I. DEPT. OF STATE BUS SVCS DIV

Articles of Incorporation Non-Profit Corporation

Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL <u>7-6-34</u>, adopt(s) the following Articles of Incorporation for such corporation:

The name of the corporation is:		
Rotary Club of Scituate Rhode Island Foundation		The same of the sa
2. The period of its duration is: CHECK ONLY ONE BOX		
Perpetual (on-going)		
Date certain for dissolution		
3. The specific purpose or purposes for which the corporation is	organized are:	
Raise funds to support community based project		a kanggara dikabandi a jada akabanda kanggarak i sa
1,	-	
		o indicate an attachment. 🗌
Provisions, if any, not inconsistent with the law, which the incorporation for the regulation of the internal affairs of the corporation.	orporators elect to set forth it pration are:	these articles of
	Check the box t	o indicate an attachment. \square
5. Name and address of the initial registered agent/office in Rho	de Island is:	
Sarah F. Malley, Gorham & Gorham		
Street Address (NOT a P.O. Box) 25 Danielson Pike		
City N. Scituate	State	Zip Code
N. Scituate	RHODE ISLAND	02857
		15.10

10:18

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BY Le 305969

Form No. 200 Revised: 2016

6. The number of the initial Board of Directo		directors) and the names	
and address of the persons who are to service.	ADDRESS		
William Vangel , Jr.	Po Box 462, N. Scitucte RI	: 02857	
Sarah F. Malley	POBOX 46, N. Scitucte RI	02457	
Micheline Gross: Lombardi	117 Central 7te, N. Scituate	RE 02857	
Lola S. Smith	117 Elmdak RD, POBOX 252, N	1. Scituate RI 0285	
		o indicate an attachment. 🔯	
7. The name and address of each incorpora			
NAME	ADDRESS		
Sarah F. Malley	69 Money Hill Road, Chepachet, RI 02814		
		o 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)		
Later enective date (Bate must be no	more than 50 days from the day of filling)		
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.			
Signature of Incorporator	Type or Print Name of Incorporator	Date	
TON POSITION HERE	Sarah F. Malley	05-12-2017	
Signature of Incorporato	Type or Print Name of Incorporator	Date	
SIGN DOCUMENT HERE			
Signature of Incorporator	Type or Print Name of Incorporator	Date	
SIGN DOCUMENT HERE			

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Attachment - Question 6, Board of Directors

Sharon S. Johnson 635 Danielson Pike N. Scituate, RI 02857