

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

_	
Γ	R.I. DEPT OF STATE R.I. DEPT OF STATE BUS SVCS DIN 9: 08

following Articles of Incorporation for such corporation:					
1. The name of the corporation is: Maccha V	erde Providen	CQ			
2. The period of its duration is: CHECK ONLY ONE BOX					
Perpetual (on-going)					
Date certain for dissolution		<u> </u>			
3. The specific purpose or purposes for which the corporation is organized are: Organization A non Profit Organization that promotes in the state of Rhode Island the Values and Objectives of the Movimunto Marcha Verde in Dominican Republic Which are to denounce and fight against the generalized Corruption and impunity that plages the Dominican Republics legal political, social and Corporative impunity that plages the Dominican Republics legal political, social and Corporative for the regulation of the internal affairs of the corporation are: Check the box to indicate an attachment.					
5. Name and address of the initial registered agent/office in Rhode Island is:					
Name Cicanna CSher Us Ruiz Street Address (NOT a P.O. Box) 373 Rotters Aue					
City Scoul Device	State RHODE ISLAND	Zip Code のようの子			

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
JUL 28 2017
BY \$\frac{14}{209} \frac{197}{9}

6. The number of the initial Board of Dire		n 3 directors) and the names and
address of the persons who are to serve	ADDRESS	· · · · · · · · · · · · · · · · · · ·
IVAIVIL		t
Marvel Masmol	23 Adelaida Not RIO	UIDENCK &2 0207
Casmen Ruiz		010cmcx 27 62907
eddy Holguin	103 Mitchell St Province	occ 92 67967
Gianna estha- ng Pay	373 Lotters Nor Provi	Dewey 82 02907
	Check the	box to indicate an attachment.
7. The name and address of each incorp		
NAME	ADDRESS	
Gianna My QUIZ	373 Potters Aug Prou	10 ence 12I 02907
	778 V-1	box to indicate an attachment.
8. Date when these articles will be effecti	ve: CHECK ONLY ONE BOX	
Date received (Upon filing) Later effective date (Date must be ne	o more than 30 days from the day of filing)	
	and affirm that I/we have examined these Ar t all statements contained herein are true and co	
Type or Print Name of Incorporator		Date
Giryana estner va Re	ها. امار د	
Signature of Incorporator)(2	7-28-17
Olympia of moorporator	SIGN DOCUMENT HERE	
Type or Print Name of Incorporator		Date
Signature of Incorporator	SIGN DOCUMENT HERE	
Type or Print Name of Incorporator		Date
Signature of Incorporator	SIGN DOCUMENT HERE	