



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$35.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Articles of Incorporation**

(Chapter 7-6-34 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the corporation is Rhode Island Healthcare Access and Affordability Partnership, Inc.

ARTICLE II

The period of its duration is ☒ Perpetual ☐

ARTICLE III

The specific purpose or purposes for which the corporation is organized are:

EDUCATE THE PUBLIC REGARDING THE NEED FOR A UNIVERSAL HEALTH CARE SYSTEM.

ARTICLE IV

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:

ARTICLE V

The street address (post office boxes are not acceptable) of the initial registered office of the corporation is:

No. and Street: 155 ADAMS DRIVE

City or Town: PORTSMOUTH

State: RI

Zip: 02871

The name of its initial registered agent at such address is LINDA UJIFUSA

ARTICLE VI

The number of directors constituting the initial Board of Directors of the Corporation is 3
and the names and addresses of the persons who are to serve as the initial directors are:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	DANIELA ABBOTT	52 LADEIRA AVE. PORTSMOUTH, RI 02871 USA
DIRECTOR	LINDA UJIFUSA	155 ADAMS DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	JOHN MARK RYAN	155 ADAMS DRIVE

ARTICLE VII

The name and address of the incorporator is:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
INCORPORATOR	LINDA UJIFUSA	155 ADAMS DRIVE PORTSMOUTH, RI 02871 USA

ARTICLE VIII

Date when corporate existence is to begin

(not prior to, nor more than 30 days after, the filing of these Articles of Incorporation)

Signed this 10 Day of August, 2017 at 11:30:35 AM by the incorporator(s). *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

Enter signature(s) below.

LINDA UJIFUSA

Form No. 200
Revised 09/07



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:

August 10, 2017 11:30 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

