



## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

2017 AUG 23 PM 1: 21

| adopt(s) the following Articles of Incorpora  1. The name of the corporation is:   | niori for Sucri Corporation.  |   |  |
|--|---|---|--|
| PAN DYNASTY, INC.  |   |   |  |
| Is this a close corporation pursuant to  | RIGL 7-1.2-1701 of the General Laws,  | 1956, as amended?  Yes No   |  |
| 2. The total number of shares which the confusion (Unless otherwise stated, all authorized)  | corporation has the authority to issue is: ad shares are deemed to have a nominal |   |  |
| Total Authorized Shares<br>(Number of Shares)  | Class of Stock  | Par Value Per Share   |  |
| 200  | Common No Par Value   | No Par Value  |  |
|  |   |   |  |
|  |   |   |  |
| If you desire, you may include a statement of voting rights, and the qualifications, limitation State any provisions here (optional):  N/A | ons, or restrictions of them which are perm                                       | ower, preferences, and rights, including nitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment. |  |
|  |   |   |  |
| 3. The name and address of the initial reg   | gistered agent/office in Rhode Island is:   |   |  |
| Agent Name Mark T. Buben, Esquire  |   |   |  |
| Street Address ( <u>NOT</u> a P.O. Box) 1441 Pa  | ark Avenue, Suite F   |   |  |
| City/Town Cranston   | State RHODE ISL   | AND Zip Code 02920  |  |
| 4. The corporation has the purpose of engor terminated in accordance with RIGL 7-  | gaging in any lawful business, and shall 1.2.                                     | have perpetual existence until dissolved  |  |

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 23 2017 1'21 BY On 310892

| <ol><li>Additional provisions, if any, not incor<br/>Articles of Incorporation:</li></ol> | nsistent with RIGL 7    | -1.2 which the inco       | orporators elect to have set forth in these              |  |
|---|-------------------------|---------------------------|--|--|
| Not applicable  |                         |                           |  |  |
|   |                         |                           |  |  |
|   |                         |                           |  |  |
|   |                         |                           | <u></u>  |  |
| The name and address of each incorp.  | rnorator is:            |                           | Check the box to indicate an attachment.                 |  |
| Name  |                         | Address                   |  |  |
| Mark T. Buben   |                         | 1441 Park Avenue, Suite F |  |  |
| City/Town<br>Cranston   |                         | State RI                  | Zip Code <b>02920</b>                                    |  |
| Name<br>N/A   |                         | Address                   |  |  |
| City/Town   |                         | State                     | Zip Code   |  |
| Name N/A  |                         | Address                   |  |  |
| City/Town   |                         | State                     | Zip Code   |  |
| 7. Date when these Articles of Incorpora  | ition will be effective | : CHECK ONLY O            | NE BOX   |  |
| ✓ Date received (Upon filing)   |                         |                           |  |  |
| Later effective date (Date must be  | no more than 90 da      | ys from the day of        | filing)  |  |
| Under penalty of perjury, I/we declare ar accompanying attachments, and that all          |                         |                           | se Articles of Incorporation, including any and correct. |  |
| Type or Print Name of Incorporator  |                         |                           | Date   |  |
| Mark T. Buben   |                         |                           | August 23, 2017  |  |
| Signature of Incorporator   | SIGN DOC                | JMENT HERE                |  |  |
| Type or Print Name of Incorporator  |                         |                           | Date   |  |
| N/A   |                         |                           |  |  |
| Signature of Incorporator   | SIGN DOC                | JMENT HERE                | •  |  |
| Type or Print Name of Incorporator  |                         | <del></del>               | Date   |  |
| N/A   |                         |                           |  |  |
| Signature of Incorporator   | SIGN DOC                | JMENT HERE                |  |  |
|   |                         |                           |  |  |