



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

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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: LATIN ADULT DAY CARE CENTER		
2. The period of its duration is: CHECK ONLY ONE BOX <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
3. The specific purpose or purposes for which the corporation is organized are: ADULT DAY CARE SERVICES <div style="text-align: right;">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: <div style="text-align: right;">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 NATIVIDAD MERCEDES		
Street Address (NOT a P.O. Box) 663 ADMIRAL STREET		
City PROVIDENCE	State RHODE ISLAND	Zip Code 02908

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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AUG 29 2017
BY CU 311296

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
NATIVIDAD MERCEDES	663 ADMIRAL ST PROV RI 02908
DASHARY MERCEDES	663 ADMIRAL ST PROV RI 02908
JAMMELL MERCEDES	663 ADMIRAL ST PROV RI 02908

Check the box to indicate an attachment. ☐

7. The name and address of each incorporator is:

NAME	ADDRESS
NATIVIDAD MERCEDES	663 ADMIRAL ST PROV RI 02908

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

NATIVIDAD MERCEDES

8/29/2017

Signature of Incorporator

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