



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: <p style="text-align: center;"><i>ATC Training Facility</i></p>		
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: <p style="text-align: center;"><i>Youth Athletic programs and training.</i></p>		
Check the box to indicate an attachment. <input type="checkbox"/>		
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:		
Check the box to indicate an attachment. <input type="checkbox"/>		
5. Name and address of the initial registered agent/office in Rhode Island is:		
Name <i>James Karalekas</i>		
Street Address (NOT a P.O. Box) <i>74 Ferncrest</i>		
City <i>East Providence</i>	State RHODE ISLAND	Zip Code <i>02915</i>

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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BY *[Signature]* 318286

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
Robert J. Rodericks	245 Esten Ave Pawtucket, RI 02861
Branden Williams	245 Esten Ave Pawtucket, RI 02861
James Karalekas	245 Esten Ave Pawtucket, RI 02861

Check the box to indicate an attachment.

7. The name and address of each incorporator is:

NAME	ADDRESS
Robert J. Rodericks	245 Esten Ave Pawtucket, RI 02861

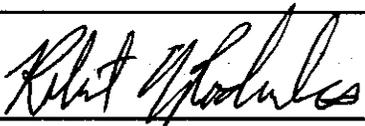
Check the box to indicate an attachment.

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 Robert J. Rodericks	Date 4/24/17
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Signature of Incorporator 
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Type or Print Name of Incorporator	Date
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Signature of Incorporator

Type or Print Name of Incorporator	Date
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Signature of Incorporator



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:

November 24, 2017 03:10 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

