## R.I. DEPT, OF STATE BUS SVCS DIV 9: 20

## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

The undersigned acting as incorporator(s) of the corporation under RIGL <u>7-1.2-202</u>, adopt(s) the following Articles of Incorporation for such corporation:

The name of the corporation is:	***			
5CS Cleaning	SERVICES	INC .		
Is this a close corporation pursuant to RIGL <u>7-1.2-1701</u> of the General Laws, 1956, as amended? Yes No				
2. The total number of shares which the corporation has the authority to issue is:  (Unless otherwise stated, all authorized shares are deemed to have a nominal or par value of \$0.01 per share.)				
	of Stock	Par Value Per Share		
(Number of Shares)				
100		.01		
Market desire and more includes a statement of all or only of the	والمراجعة المراجعة ا			
If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them which are permitted by the provisions of RIGL <u>7-1.2.</u>				
State any provisions here (optional):  Check the box to indicate an attachment.				
3. The name and address of the initial registered agent/office in Rhode Island is:				
Agent Name Admakinubia D Alues				
Street Address (NOT a P.O. Box)	<u>~~</u> ,	1		
47 Vanoxdon St	47 Langdon	st.		
City/Town	State	Zip Code		
Proudence	RHODE ISLAN	ID 02904		
4. The corporation has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved				
or terminated in accordance with RIGL <u>7-1.2</u> .				

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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5. Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these			
Articles of Incorporation:			
	Chark tha h	oox to indicate an attachment.	
The name and address of each incorporator is:	Check the b	ox to indicate an attachment.	
Name .	Address		
Adnaknubua D Aluus	47 lamadion 5	it	
City/Town	State	Zip Code	
Providence	RI	102904	
Name	Address		
January & Ferrena	47 langulon		
City/Town ProJudine	State 27 5	Zip Code 0 9 0 9	
Name	Address	102901	
Name	Address		
City/Town	State	Zip Code	
7. Date when these Articles of Incorporation will be effective: CHECK ONLY ONE BOX			
Date received (Upon filing)			
Later effective date (Date must be no more than 90 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	
Adnakinubia D Ali	li S	11/27/2017	
Signature of Incorporator			
Old Fictive recorded S		Data	
Type or Print Name of Incorporator		Date	
Ianary K terreira		11/27/2017	
Signature of Incorporator			
Famous K Forcore			
Type or Print Name of Incorporator		Date	
Signature of Incorporator			
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