

Department of State - Business Services Div

Article of Incorporation

Professional Service Corporation

→ Filing Fee: \$230.00 minimum

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The undersigned acting as incorporato RIGL 7-5.1 and 7-1.2, adopt(s) the following the following transfer in the second content of t				
The name of the corporation is:	<u> </u>			
The Law Offices of Carl J. Ricci, Inc	c.			
Is this a close corporation pursuan	t to RIGL <u>7-1,2-1701</u> of	the General Laws, 1956, as	amended? Yes No	
2. The profession to be practiced thro	ugh the professional se	rvice corporation is:		
Law Practice				
3. The total number of shares which the (Unless otherwise stated, all author Total Authorized Shares (Number of Shares)		ed to have a nominal or par va	ulue of \$0.01 per share.) ar Value Per Share	
1000	Common	No Par	No Par Value	
If you desire, you may include a stateme voting rights, and the qualifications, limit any provisions here (optional).		them which are permitted by th		
4. The name and address of the initial	registered agent/office	in Rhode Island is:		
Agent Name Andrew R. Bilodeau, E	sq.			
Street Address (NOT a P.O. Box) 130	0 Division Road, Sult	e 201		
City/Town West Warwick	,	State RHODE ISLAND	Zip Code 02893	
5 The corporation shall have perpetua	al existence until dissol	ved or terminated in accordan	ice 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 FILED

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FORM 112- Revised. 08/2016

6. Additional provisions, if any, not inconsistent with RIGL 7-1	2 which the incorporators elec	t to have set forth in these	
Articles of Incorporation: See Schedule A		4	
, doe donoune A			
The name and address of each incorporator is:	Check the bo	ox to indicate an attachment.	
Name	Address		
Andrew R. Bilodeau, Esq	1300 Division Rd., Suite 201		
City/Town West Warwick	State RI	Zip Code 02893	
Name	Address		
City/Town	State	Zip Code	
Name	Address		
City/Town	State	Zip Code	
8. Date when these Articles of Incorporation will be effective.	CHECK ONLY ONE BOX	.l	
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 hav accompanying attachments, and that all statements contained		ncorporation, including any	
Signature of Incorporator		Date	
SIGN POCKMENT HERE		2/26/18	
Signature of Incorporator		Date	
SIGN DOCUMENT FIERE			
Signature of Incorporator		Date	
SIGN DOCUMENT HERE			

SCHEDULE A to the Articles of Incorporation of The Law Offices of Carl J. Ricci, Inc.

- Provisions, if any, for the regulation of the internal affairs of the corporation:
- (a) Action by the stockholders pursuant to Rhode Island General Laws, is hereby authorized.
- (b) No director or stockholder undertaking to exercise the responsibilities of a director shall have personal liability to the corporation or to its stockholders for monetary damages for breach of such director's or stockholder's duty as a director or, in the case of a stockholder, duty as a person undertaking to exercise the responsibilities of a director; provided that this provision shall not eliminate or limit the liability of such director or stockholder for: (i) any breach of such director's or stockholder's duty of loyalty to the corporation or its stockholders; (ii) acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law; (iii) liability imposed pursuant to the provisions of Rhode Island General Laws §7-1.2-811; or (iv) any transaction from which such director or stockholder derived an improper personal benefit (unless said transaction is permitted by Rhode Island General Laws §7-1.2-807).
- (c) A director of the corporation shall not, in the absence of fraud, be disqualified by his office from dealing or contracting with the corporation either as vendor, purchaser or otherwise, nor in the absence of fraud, shall any contract or other transaction of the corporation be affected or invalidated in any way by the fact that any of the Directors of the corporation are in anywise interested in or connected with any other party to such contract or transaction or are themselves parties to such contract or transaction; provided, however that such interest and connection either shall be fully disclosed to a meeting of the Board of Directors, or of a committee thereof having authority in the premises, at which such contract or transaction is authorized, confirmed or approved, or shall at the time be otherwise known to the Directors present at such meeting.

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/26/2018 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Daniel Flynn Kronholm Insurance a Division of Brown & Brown of CT 55 Capital Blvd., Suite 102 FAX (A/C, No): 203-639-0031 PHONE (AC, No, Ext): 860-665-8426 E-MAIL ADDRESS: dflynn@bbhartford.com Rocky Hill, CT 06067 Daniel Flynn INSURER(S) AFFORDING COVERAGE NAIC # 20443 INSURER A : Continental Casualty Co. Law Office of Carl J. Riccl INSURED 9 Central Street Providence, RI 02907 INSURER E : COVERAGES **CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS POLICY EFF POLICY EXP ADOL SUBR TYPE OF INSURANCE LIMITS POLICY NUMBER INSD WVD EACH OCCURRENCE TOAMAGE TO RENTED PREMISES (Ea occurrence) COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR VED EXP (Any one person) PERSONAL & ADV INJURY GENU AGGREGATE LIMIT APPLIES PER GENERAL AGGREGATE POLICY PRO-PRODUCTS - COMPIOP AGG | \$ OTHER COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY BODILY INJURY (Per person) | \$ ANY AUTO T SCHEDULED AUTOS NON-CWNED AUTOS ALLOWNED AUTOS 800iLY INJURY (Per accident) - \$ PROPERTY DAMAGE 5 HIRED AUTOS (Per accident) 3 UMBRELLA LIAS EACH OCCURRENCE | \$ OCCUR EXCESS LIAB 5 AGGREGATE CLAIMS MADE DED RETENTIONS WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY EIL EACH ACCIDENT . 5 jany proprietor/partner/executive Officer/member excluded? E L D'SEASE -EA EMPLOYEE \$... OPPICER THERES IN CASCALLY
(Mandatory in NH)
If yes, describe under
DESCRIPT ON OF OPERATIONS below į EIL DISEASE - POLICY LIMIT | \$ 500.000 Lawyers Prof. 596873939 02/23/2018 02/23/2019 PER CLAIM 1,000,000 AGGREGATE DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CLAIMS MADE LAWYERS PROFESSIONAL LIABILITY - DEDUCTIBLE \$5,000 CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Law Office of Carl J. Ricci 9 Central Street Providence, RI 02907 AUTHORIZED REPRESENTATIVE Valle