RI SOS Filing Number: 201861114710 Date: 3/28/2018 2:22:00 PM

State of Rhode Island and Providence	æ Plantations	
Department of State - Bus	iness Services Division	I
THE STREET		2
		E COC
Articles of Incorporation		STARR
DOMESTIC Business Corporation		R CAR
•		교 작곡
→ Filing Fee: \$230.00 minimum		PH CONTROL
The state of the s		(/ ₀ 0
The undersigned, acting as incorporator(s adopt(s) the following Articles of Incorpora) of the corporation under RIGL <u>7-1.2-20</u>	22.
· · · · · · · · · · · · · · · · · · ·	tion for such corporation:	D O
The name of the corporation is:	→	
Grevatione 1	Tran (no)
		, <u> </u>
	RIGL 7-1,2-1701 of the General Laws,	
2. The total number of shares which the c	corporation has the authority to issue is:	
	d sheres are deemed to have a nominal	
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
(Number of Shares)		_
	('ommon	σ
		
If you desire, you may include a statement of	of all or any of the designations and the pr	ower, preferences, and rights, including
voting rights, and the qualifications, limitation	ns, or restrictions of them which are perm	nitted by the provisions of RIGL 7-1.2.
State any provisions here (optional):		Check the box to indicate an attachment
		•
3. The name and address of the initial reg	istered agent/office in Rhode Island is:	
Agent Name		
I hoold la	anha	
Street Address (NOT a P.O. Box)	YN DO	
	0.1	
85 Louglas	WILL.	
City/Town	State	Zip Code
Drilith+ield	RHODE ISL	\square \square \square \square \square \square
4. The corporation has the purpose of eng	aging in any lawful business, and shall	have perpetual existence until dissolved
or terminated in accordance with RIGL 7-	<u>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 STARAP MAR 2 8 2011

BY 320568

FORM 100 - Revised: 11/2017

<u> </u>		
Additional provisions, if any, not inconsistent with RIC Articles of Incorporation:	3L <u>7-1.2</u> which the incorp	porators elect to have set forth in these
. '		
	C	Ne call the best to indicate an attachment
The name and address of each incorporator is:		Check the box to indicate an attachment
Name	Address	
Kene Allard	85	Douglas Pike
City/Town	State 0 T	Zip Code
Name Name	RI	02917
Name	Address	
City/Town	State	Zip Code
Name	Address	
C*-07		
City/Town	State	Zip Code
7. Date when these Articles of Incorporation will be effect	t ctive: CHECK ONE ONL'	Y BOX
Date received (Upon filing)		
Later effective date (Date must be no more than 90	D days from the date of file	ding)
Under penalty of perjury, I/we declare and affirm that I/w		-
accompanying attachments, and that all statements con	ntained herein are true ar	nd correct.
Type or Print Name of Incorporator		Date
Kene Allard		3/18/18
Signature of Incorporator		
I Clare SIGN D	DOCUMENT HERE	
Type or Print Name of Incorporator		Date
Signature of Incorporator		
SIGN D	DOCUMENT HERE	
Type or Print Name of Incorporator		Date
Signature of Incorporator		
ଓାସେ ପ	OCUMENT HERE	

RI SOS Filing Number: 201861114710 Date: 3/28/2018 2:22:00 PM



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:

March 28, 2018 02:22 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

