

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

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

SECRETARY OF STATE CORPORATIONS DIV

Article of Incorporation Business Corporation

Filing Fee: \$230.00 minimum

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

1. The name of the corporation is:			
	JLD CORPORATION	·	
Is this a close corporation pursuant to	RIGL 7-1.2-1701 of the General Lav	vs, 1956, as amended? 📝 Yes 🗌 No	
2. The total number of shares which the of (Unless otherwise stated, all authorized)			
Total Authorized Shares Class of Stock (Number of Shares)		Par Value Per Share	
300	Common	\$10.00	
If you desire, you may include a statement ovoting rights, and the qualifications, limitation State any provisions here (optional):	ns, or restrictions of them which are p		
3. The name and address of the initial reg	jistered agent/office in Rhode Island	is:	
Agent Name Jaclyn Tsang			
Street Address (NOT a P.O. Box) 1237	Elmwood Avenue		
City/Town Providence	State RHODE ISLAND	Zip Code 02907	
4. The corporation has the purpose of endissolved or terminated in accordance with	• •	hall have perpetual existence until	

8:44 AM

FILED APR 1 8 2018

BY 328908

Form No. 100 Revised: 2016

5. Additional provisions, if any, not Articles of Incorporation:	t inconsistent with RIC	GL 7-1.2 which the ir	corporators elect to have set forth in these	
· · · · · · · · · · · · · · · · · · ·		-1.1-30.3 is here		
6. The name and address of each	h incorporator is:		Check the box to indicate an attachment.	
Name Raymond J. Tomasso, Esq.		Address 125	Address 1258 Elmwood Avenue	
City/Town Providence	State RI		Zip Code 02907	
Name		Address	· · · · · · · · · · · · · · · · · · ·	
City/Town	State		Zip Code	
Name		Address		
City/Town	State		Zip Code	
7. Daté when these Articles of Inc	orporation will be effe	ctive: CHECK ONLY	ONE BOX	
Date received (Upon filing) Later effective date (Date mu	ust be no more than 9	0 days from the day	of filing)	
Under penalty of perjury, I/we dec accompanying attachments, and t			hese Articles of Incorporation, including any ue and correct.	
Signature of Incorporator SIGN POLIMENT HER HONNY			Date 04/ 16 /2018	
Signature of Incorporator			Date	
SIGN DOCUMENT HERE				
Signature of Incorporator SIGN DOCUMENT HERE			Date	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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