



Articles of Incorporation

DOMESTIC Business Corporation

-> Filing Fee. \$230.00 minimum

The undersigned, acting as incorporators adopt(s) the following Articles of Incorpo	(s) of the corporation under RIGL <u>7-1,2-</u> ration for such corporation:	<u>-202,</u>
The name of the corporation is:		
AJ FRAME CONSTRUC		
Is this a close corporation pursuant	to RIGL 7-1.2-1701 of the General Law	s 1956 as amended? 🔽 Yes 🔝 No
2. The total number of shares which the (Unless otherwise stated, all authorize	e corporation has the authority to issue zed shares are deemed to have a nomi	is nal or par value of \$0.01 per share.)
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
5 00	STK	0.01
If you desire, you may include a stateme	int of all or any of the designations and the	e power, preferences, and rights, including
voting rights and the qualifications limits	ations or restrictions of them which are p	armitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment
State any provisions here (optional):		Griddin in Box to mercure a very
	and a sent of the six Physics is provided in the six	io:
	registered agent/office in Rhode Island	ю.
Agent Name EUFROSINA PACHECO	ı 	
Street Address (NOT a P.O. Box)	BROAD STREET	
City/Town PAWTUCKET	State RHODE	ISLAND Zip Code 02860
4. The corporation has the purpose of	engaging in any lawful business, and s	hall have perpetual existence until dissolved
or terminated in accordance with RIGI	_ <u>7-1</u> _2.	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2315

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 31

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Additional provisions, if any, not inconsistent with RIGL Articles of Incorporation;	7-12 which the incorp	orators elect to have set forth in these
	C	heck the box to indicate an attachment
6. The name and address of each incorporator is		
Name JOCELYN ROIG	Address 10 GARFIELD AVENUE	
Clty/Town CRANSTON	State RHODE ISLA	AND Zip Code 02920
Name	Address	-
City/Town	State	Zip Code
Name	Address	
City/Town	State	Zip Code
7. Date when these Articles of Incorporation will be effect	tive: CHECK ONE ON	LY BOX
Date received (Upon filing) Later effective date (Date must be no more than 90)	days from the date of	filing)
Under penalty of perjury, I/we declare and affirm that I/w accompanying attachments, and that all statements con	e have examined these tained herein are true a	Articles of Incorporation, including any and correct.
Type or Print Name of Incorporator		Date
JOCELYN ROIG		06/11/2018
Signature of Incorporator		
Type of Print Name of Incorporator		Date
Signature of Incorporator		<u> </u>
Type or Print Name of Incorporator		Date
Signature of Incorporator		