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State of Knode Island and Providence Plantations	Division					
Department of State - Business Services	Division	·	~3	, ,,		
•			00 CO	či.		
			<u>≽</u>	8		
Articles of Incorporation			AUG	黑巴		
DOMESTIC Non-Profit Corporation				\$ <u>5</u>		
				ΖΈ.		
→ Filing Fee: \$35.00				귀띥		
		ı	္က ္တ	<u>(2)</u>		
The undersigned, acting as incorporator(s) of a corporation under RIGL <u>7-6-34</u> , adopt(s) the						
following Articles of Incorporation for such corporation:			1.	刀		
The name of the corporation is:		· · · · · · · · · · · · · · · · · · · 				
- Sign gatocket St	12/nas /Enc	UN (S				
1. The name of the corporation is:	Jian /Sa	ugatucket s	<i>p</i> rings\			
Ancto testimal les	130CIOI OF 11 TO	nchia usca	nicuios.	\~		
		VINT 112200	COTION CO			
2. The period of its duration is: CHECK ONLY ONE BOX			e e e			
Perpetual (on-going)		. 🗸				
		<u>'</u> -c) 3 3 5 6 7 7 7 8	ָס ירי		
Date certain for dissolution			<u> </u>	3		
3. The specific purpose or purposes for which the corporation to have activities for read an others - 1 E. games,	on is organized are:	1 + 1.5	- X- 20.7			
To have activities der re	sidenty that a	HONE ON		9		
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an others - 12. years,	way of 1 soft	700	(EE)	~ _		
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	Check the	box to indicate an	attachmen	1t. 🗀		
4. Provisions, if any, not inconsistent with the law, which the	incorporators elect to set forth	in these articles o	of incorpora	ation		
for the regulation of the internal affairs of the corporation are:						
	_					
-	Check the	box to indicate an	attachmen	it. 🔲		
5. Name and address of the initial registered agent/office in	Rhode Island is:		·			
Nieron						
Caroline M Elli	'S		•			
(1)						
Street Address (NOT a P.O. Box) (HOUSE) ART-	9 //.					
15 10 wn Havella Api-	216					
City Hapkenton	State	Zip Code				
Daptenton	RHODE ISLAND	028	73			
	<u> </u>					
MAIL TO:						
Division of Business Services	FILED					
148 W. River Street Providence. Rhode Island 02904-2615 Phone: (401) 222-3040	· ILL					
Website: www.sos.n.gov	SEP 14 2010					

FORM 200 - Revised | 05/2016

The number of the initial Board of D address of the persons who are to sen	• —— •	ss than 3 directors) and the names and		
NAME	ADDRESS			
Gasoline M Flis	15 Town house 7	Rdood 216 Hapkinton?		
Godet addy	15 Townhouse Rd (In 17 118 Hoplestor (9 02		
Notele Matylewrz	15 Townhorse Rd Us	nit 2171/opkanton, PDO		
Mauran Alfoben	15 hown house Rd. Ap)	eck the box to Indicate an attachment.		
7. The name and address of each inco	rporator is:			
NAME	ADDRESS			
Caroline M Ellis	15 Townhouse Rd	ord 216 Haykorton Redo		
Chall CANDy	15 Townhouse Rd On	I 118 Hopkin an ROOZE		
Matilda Matylowing	15 Townhouse Rd Un	A 217 Hopkinton Rol D		
mauren & good	, , , , , , , , , , , , , , , , , , ,	eck the box to indicate an attachment.		
B. Date when these articles will be effe		eck the box to indicate an attachment.		
17				
Date received (Upon filing)				
Later effective date (Date must be	e no more than 30 days from the day of filing)		
	re and affirm that I/we have examined th	nese Articles of Incorporation, including		
<u> </u>	that all statements contained herein are true			
Type or Print Name of Incorporator		Date		
aroline no clli	1 15 /Desn	8- 2018		
Signature of Incorporator	2.9			
Caroline Jan	SYN DOCUMENT HERE			
Type or Print Name of Incorporator	,	Date		
matilda R mo	zty/ewicz	8- 2018		
Signature of Incorporator	21/100102	1		
Matilda R. O	Notific DOCHLENT HERE			
Type or Print Name of Incorporator		Date		
Judith Ad	dy	8-2018		
Signature of Incorporator	SIGN DOCUMENT HERE			
MAUREEN A. GUDE	caay			
		8- 201		
Maurien A. Go	per			

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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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:

September 14, 2018 01:13 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

