



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

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SECRETARY OF STATE
CORPORATIONS DIV
2018 SEP 26 5 AM 10:55

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL 7-6-34, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is:

Madeline's Helping Hands

2. The period of its duration is. **CHECK ONE BOX ONLY**

☒ Perpetual (on-going)

☐ Date certain for dissolution _____

3. The specific purpose or purposes for which the corporation is organized are:

raise money through art and fundraisers

Check the box to indicate an attachment ☐

4. Provisions, if any, not consistent with the law, which the incorporators elect to set forth in these Articles of Incorporation for the regulation of the internal affairs of the corporation are:

Check the box to indicate an attachment ☐

5. Name and address of the initial registered agent/office in Rhode Island is:

Agent Name

Meagan Murray

Street Address (NOT a P.O. Box)

341 West Shore Rd

City

Warwick

State

RHODE ISLAND

Zip Code

02889

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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6. The number of the initial Board of Directors of the Corporation is 3 (not less than 3 directors) and the names and address of the persons who are to serve as the initial directors are:

NAME	ADDRESS
Meagan Murray	341 West Shore Rd Warwick RI 02889
Diana Morin	341 West Shore Rd Warwick RI 02889
Linda Marini	PO Box 246 Coventry RI 02816

Check the box to indicate an attachment ☐

7. The name and address of each incorporator is:

NAME	ADDRESS
Meagan Murray	341 West Shore Rd Warwick RI 02889

Check the box to indicate an attachment ☐

8. Date when these Articles of Incorporation will be effective. **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 days from the date of filing) _____

Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Incorporator

Date

Meagan Murray

9/26/18

Signature of Incorporator



SIGN DOCUMENT HERE

Type or Print Name of Incorporator

Date

Signature of Incorporator

SIGN DOCUMENT HERE

Type or Print Name of Incorporator

Date

Signature of Incorporator

SIGN DOCUMENT HERE