



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$10.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Restated Articles of Incorporation**

(Section 7-6-42 of the General Laws of Rhode Island, 1956, as amended)

**ARTICLE I**

The name of the corporation is Preserve Wakefield

If the entity's name is changing, state the new name: The South Kingstown Village Trust

**ARTICLE II**

If the corporate duration is changing, so state:  Perpetual

If the corporate purpose is changing, so state:

THE SOUTH KINGSTOWN VILLAGE TRUST WORKS TO ENSURE THAT SOUTH KINGSTOWN'S UNIQUE SENSE OF PLACE AND COMMUNITY THRIVE THROUGH THOUGHTFUL PRESERVATION AND DEVELOPMENT. THE TRUST ADVOCATES FOR THOSE STRATEGIES WHICH ENHANCE THE VITALITY AND SUSTAINABILITY OF THE TOWN'S VILLAGES INCLUDING THE USE OF DESIGN STANDARDS, CAREFUL PLANNING AND COMMUNITY EDUCATION. WE INFORM LEADERS, DECISION MAKERS, AND CONCERNED CITIZENS ABOUT THE MANY BENEFITS OF SMART GROWTH DEVELOPMENT STRATEGIES AND PROVIDE STEWARDSHIP OF ASSETS WITHIN THE TOWN'S VILLAGES WHEN IN THE PUBLIC INTEREST. WE CONVENE BROAD COALITIONS THAT ADVOCATE POLICY REFORMS AND SPECIFIC PROJECTS DESIGNED TO BUILD COMMUNITIES WHERE ALL PEOPLE AND BUSINESSES CAN THRIVE.

If there is a change in the number of directors, modify this section:

The number of directors constituting the Board of Directors of the Corporation is

and the names and addresses of the persons who are to serve as the directors are:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	WILLIAM MURRAY GATES IV	17 BRIAR LANE KINGSTON, RI 02881 USA
TREASURER	KARINA BURSTON	104 HIGHLAND AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	KARINA BURSTON	104 HIGHLAND AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	WILLIAM MURRAY GATES IV	17 BRIAR LANE KINGSTON, RI 02881 USA
DIRECTOR	MARC JOEL LEVITT	100 ORCHARD AVE WAKEFIELD, RI 02879 USA

If there are any other provisions to be restated, so state:

### ARTICLE III

The Restated Articles were adopted in the following manner:

**(check one box only)**

The articles and/or amendment(s) were adopted at a meeting of members held on \_\_\_\_\_, at which meeting a quorum was present, and the correction received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.

The articles and/or amendment(s) were adopted by a consent in writing on \_\_\_\_\_, signed by all members entitled to vote with respect thereto.

The articles and/or amendment(s) were adopted at a meeting of the Board of Directors held on \_\_\_\_\_, and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

### ARTICLE IV

Briefly describe amendments in the space below. If there are no such amendments, state "NONE":

### ARTICLE V

These Restated Articles of Incorporation correctly set forth without change the corresponding provisions of the Articles of Incorporation, as previously amended, and the restated articles of incorporation, together with the designated amendments, if any, supersede the original articles of incorporation and all previous amendments to the articles of incorporation.

### ARTICLE VI

Date when restated article is to become effective 10/24/2018  
(not prior to, nor more than 30 days after, the filing of these Articles of Amendment)

**Signed this 24 Day of October, 2018 at 10:58:18 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

Preserve Wakefield  
Corporate Name

By WILLIAM M. GATES

President or  Vice President (check one)

**AND**

By KARINA BURSTON

Secretary or  Assistant Secretary (check one)

Form No. 202  
Revised 09/07

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