



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

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SECRETARY OF STATE
CORPORATIONS DIV
2019 JAN:29 AM 10:43

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:

East Coast Scorpions

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:

Non-profit girls softball league

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 Kristen Prest

Street Address (NOT a P.O. Box)

27 Unity Ct.

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

FILED

JAN 29 2019

STAMP 10:43

FOR SECRETARY OF STATE

BY On JAQUE

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
Darrin Jacques	489 East Greenwich Ave. West Warwick RI 02893
Kristen Prest	27 Unity Ct. Warwick RI 02889
Amanda DiFiore	364 Lakeshore Dr. Warwick RI 02889

Check the box to indicate an attachment ☐

7. The name and address of each incorporator is:

NAME	ADDRESS
Kristen Prest	27 Unity Ct. Warwick RI 02889
Amanda DiFiore	364 Lakeshore Dr. 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.

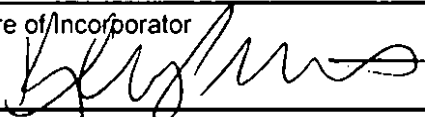
Type or Print Name of Incorporator

Kristen Prest

Date

11/29/19

Signature of Incorporator



SIGN DOCUMENT HERE

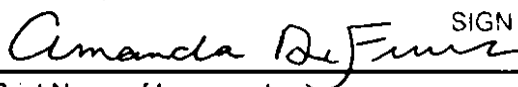
Type or Print Name of Incorporator

Amanda DiFiore

Date

11/29/19

Signature of Incorporator



SIGN DOCUMENT HERE

Type or Print Name of Incorporator

Date

Signature of Incorporator

SIGN DOCUMENT HERE



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

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:

January 29, 2019 10:43 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

