



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

SECRETARY OF STATE
CORPORATIONS DIVISION
2019 APR 16 PM 12:33

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: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Heaven's Leas Rescue</div>		
2. The period of its duration is: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
3. The specific purpose or purposes for which the corporation is organized are: <div style="text-align: center; font-family: cursive; font-size: 1.1em;"> Providing Service for the Community by Spay/Neutering feral CAT colonies, Rescue Homeless And Abused Animals Accept owner Surrenders and eventually apply to Rescue out of STATE + Country </div> <div style="text-align: right; font-size: 0.8em;">Check the box to indicate an attachment <input type="checkbox"/></div>		
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: <div style="text-align: center; font-family: cursive; font-size: 1.1em;">None at this time</div> <div style="text-align: right; font-size: 0.8em;">Check the box to indicate an attachment <input type="checkbox"/></div>		
5. Name and address of the initial registered agent/office in Rhode Island is		
Agent Name <div style="font-family: cursive; font-size: 1.1em;">Elizabeth Davis</div>		
Street Address (NOT a P.O. Box) <div style="font-family: cursive; font-size: 1.1em;">27 Zanfagna St.</div>		
City <div style="font-family: cursive; font-size: 1.1em;">Johnston</div>	State <div style="text-align: center; font-weight: bold;">RHODE ISLAND</div>	Zip Code <div style="font-family: cursive; font-size: 1.1em;">02919</div>

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 **STAMP**

APR 16 2019

BY 1561R

FORM 200 - Revised 11/2017

A.A. 12:33pm.

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
Elyssa Cabral	6 Avon Street Providence RI 02907
Joy Spearing	6 Avon Street Providence RI 02907 2 nd Floor
Eliseo Harris	27 Zantagna Street, Johnston RI 02919
ELISEO	

Check the box to indicate an attachment. ☐

7. The name and address of each incorporator is:

NAME	ADDRESS
Elizabeth L. Davis	27 Zantagna Street Johnston RI 02919
Joy Spearing	6 Avon Street Providence RI 02907
Elyssa Cabral	6 Avon Street Providence RI 02907
Eliseo Harris	27 Zantagna Street Johnston RI 02919

Check the box to indicate an attachment. ☐

8. Date when these articles will be effective: **CHECK ONLY ONE BOX**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 days from the day 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
Joy Spearing	4/17/19

Signature of Incorporator	SIGN DOCUMENT HERE
<i>Joy Spearing</i>	

Type or Print Name of Incorporator	Date
Eliseo Harris	4/17/19

Signature of Incorporator	SIGN DOCUMENT HERE
<i>Eliseo Harris</i>	

Type or Print Name of Incorporator	Date
Elyssa Cabral	4/17/19

Signature of Incorporator	SIGN DOCUMENT HERE
<i>Elyssa Cabral</i>	

Incorporator →
Elizabeth L. Davis
Elizabeth L. DAVIS.

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.



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:

April 16, 2019 12:33 PM

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

