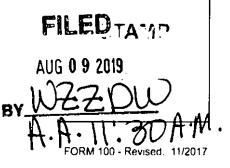
State of Rhode Island and Providen Department of State - Bus		
Articles of Incorporation		R. I. CUR
DOMESTIC Business Corporation		
→ Filing Fee: \$230.00 minimum		YCS T
The undersigned, acting as incorporator(s adopt(s) the following Articles of Incorpora	s) of the corporation under RIGL <u>7-1.2-202</u> , ation for such corporation:	II: S
1. The name of the corporation is:		
Choice-gifts.com Corpo	oration	
Is this a close corporation pursuant to	RIGL 7-1.2-1701 of the General Laws, 195	6, as amended?
2. The total number of shares which the		
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
100	Common No Par	0.01
If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them which are permitted by the provisions of RIGL 7-1.2. State any provisions here ( <i>optional</i> ): Check the box to indicate an attachment		
3. The name and address of the initial re	gistered agent/office in Rhode Island is:	
Agent Name Christopher Crawford		
Street Address ( <u>NOT</u> a P.O. Box) Peace	dale Mill Complex, 1425 Kingston Rd., Su	ite 29
City/Town Wakefield	State RHODE ISLAN	ID Zip Code 02879
4. The corporation has the purpose of er or terminated in accordance with RIGL <u>7</u>	ngaging in any lawful business, and shall ha	ve perpetual existence until dissolved

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



5 Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these Articles of Incorporation:

Check the box to indicate an attachment 6 The name and address of each incorporator is: Name Christopher Crawford Address 1425 Kingston Rd., Suite 29 Zip Code 02879 City/Town Wakefield State RI Name Address State City/Town Zip Code Name Address City/Town State Zip Code 7 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 90 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. Signature of Incorporator Date HERE if CY 29/2019 Signature of Incorporator Date **SCUMENT HERE** G Signature of Incorporator Date SIGN DOCUMENT HERE

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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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:

August 09, 2019 11:30 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

