



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

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CORPORATIONS DIV
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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: <i>Paradise of Portsmouth</i>		
2. The period of its duration is: CHECK ONLY ONE BOX <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: <i>Promote low + moderate income housing</i> <i>Provide information to mobile home owners.</i>		
4. Provisions, if any, not inconsistent 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: <i>/</i>		
5. Name and address of the initial registered agent/office in Rhode Island is:		
Name <i>Dawn Dimery</i>		
Street Address (NOT a P.O. Box) <i>9 Scotty Dr.</i>		
City <i>Portsmouth</i>	State RHODE ISLAND	Zip Code <i>02871</i>

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
SCOTT BRUNNER	9 Scotty Dr Portsmouth RI 02871
Dawn Dimery	9 Scotty Dr Portsmouth RI 02871
Steve Reise	41 Donna Drive Portsmouth RI 02871

Check the box to indicate an attachment.

7. The name and address of each incorporator is:

NAME	ADDRESS
SCOTT BRUNNER	9 Scotty Dr Portsmouth RI 02871
Dawn Dimery	9 Scotty Dr Portsmouth RI 02871
Steve Reise	41 Donna Drive Portsmouth RI 02871

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 <u>SCOTT BRUNNER</u>	Date <u>10/24/19</u>
Signature of Incorporator <u>[Signature]</u> SIGN DOCUMENT HERE	
Type or Print Name of Incorporator <u>Dawn Dimery</u>	Date <u>10/24/19</u>
Signature of Incorporator <u>[Signature]</u> SIGN DOCUMENT HERE	
Type or Print Name of Incorporator <u>Stephen Reise</u>	Date <u>10/24/19</u>
Signature of Incorporator <u>[Signature]</u> 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:

October 28, 2019 11:50 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

