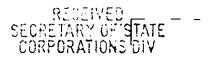
State of Rhode Island and Providence Plantations
Department of State - Business Services Division



2019 NOV -8 PM 1: 24

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation unfollowing Artislag of Incorporation (s)	nder RIGL <u>7-6-34</u> , adopt(s) the	•
following Articles of Incorporation for such corporation: 1. The name of the corporation is:	·	l
OPERACION EPAFRO	ODITO	
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 TO PREACH THE GOSPEL OF JESUS CHRIST TO EVE	•	OPE TO THOSE IN NEED.
	Check the	box to indicate an attachment
Provisions, if any, not consistent with the law, which the infor the regulation of the internal affairs of the corporation are NONE	corporators elect to set forth in	these Articles of Incorporation
	Check the	box to indicate an attachment
5. Name and address of the initial registered agent/office in F	Rhode Island is:	
Agent Name ROBERTO RAMIREZ		
Street Address (NOT a P.O. Box) 370 BUTTOWOODS AVE	NUE	- ,
City WARWICK	State RHODE ISLAND	Zip Code 02886

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov riled

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1:24

BY ZZPGG

address of the persons who are to NAME	ADDRESS		
ROBERTO RAMIREZ	370 BUTTONWOODS AVE, WARWICK, RI 02886		
MARIA QUIÑONEZ			
Pameia Then	575 dyer Ave, Cranston, RI 02920		

7. The name and address of each	Check the box to indicate an attachment		
NAME	ADDRESS		
ROBERTO RAMIREZ	370 BUTTONWOODS AVE, WARWICK, RI 02886		
MARIA QUIÑONEZ	370 BUTTONWOODS AVE, WARWICK, RI 02886		
Pameia Then	575 Dyer ave, Cranston, PID 02920		
	Check the box to indicate an attachment		
Under penalty of perjury, I/we deci	the no more than 30 days from the date of filing) are and affirm that I/we have examined these Articles of Incorporation, including any		
	at all statements contained herein are true and correct.		
Type or Print Name of Incorporator ROBERTO RAMIREZ	Date 11 8 1.9		
Signature of Incorporator	Polet Namines		
Type or Print Name of Incorporator	Date		
MARIA QUIÑONEZ	Mun Gensa 11/08/19		
Signature of Incorporator			
Type or Print Name of Incorporator			
Pamela Then	11/8/19		
Signature of Incorporator	en		