



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

Certificate of Authority
FOREIGN Non-Profit Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-6-74, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

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1. The name of the corporation is:

Change Summer, Inc.

1a: The name, if different, which it elects to use in Rhode Island is:

*If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application.

2. It is incorporated under the laws of:

Delaware

3. The date of its incorporation is:

May 7, 2018

And the period of its duration is: **CHECK ONLY ONE BOX**

☒ Perpetual (on-going)

☐ Date certain for dissolution _____

4. The address of its principal place of business is:

119 W. 72nd Street, Suite #187, New York, NY 10023

5. The name and address of the initial registered agent/office in Rhode Island is:

Agent Name **Registered Agents Inc.**

Street Address (NOT a P.O. Box) **One Richmond Square, STE 125B**

City/Town **Providence**

State **RHODE ISLAND**

Zip Code **02906**

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 purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:

Change Summer, Inc.'s purpose is to operate summer camps for low-income students. The camps will have an education component designed to increase low-income students' independence, confidence, responsibility, and curiosity, with the ultimate goal of assisting each student camper to close the economic achievement gap.

Check the box to indicate an attachment ☐

7. The names and respective addresses of its directors and officers are:

OFFICE	NAME	ADDRESS
Director	Sam Borek	387 Wheeler Place, Haworth, NJ 07641
Director	Julie Jackson	826 Broadway, 9th Floor, New York, NY 10003
Director		
President	Evan Rudall	716 Valley Road, Montclair, NJ 07043
Vice President	Joshua Phillips	119 W. 72nd Street, Suite #187, New York, NY 10023
Treasurer		
Secretary	Samantha Tweedy	826 Broadway, 9th Floor, New York, NY 10003

Check the box to indicate an attachment ☐

8. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Authority, including and accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of ☒ President OR ☐ Vice President

Evan Rudall

Date

05/05/20

Signature of President OR Vice President

Evan Rudall

Type or Print Name of ☒ Secretary OR ☐ Assistant Secretary

Samantha Tweedy

Date

05/05/20

Signature of Secretary OR Assistant Secretary

Samantha Tweedy

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHANGE SUMMER, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF MAY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHANGE SUMMER, INC." WAS INCORPORATED ON THE SEVENTH DAY OF MAY, A.D. 2018.


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You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 202892267

Date: 05-07-20



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:

June 04, 2020 11:43 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

