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1 2020 NOV 17 P 2: 49

## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

The undersigned, acting as incorporator( adopt(s) the following Articles of Incorpor		-202.	
1. The name of the corporation is:			
PEARWOOD ARCHITECTURAL WOOI	OWORKING INC		
Is this a close corporation pursuant to	o RIGL 7-1.2-1701 of the General Law	rs, 1956, as amended? Yes 📝 Nó	
2. The total number of shares which the		iş:	
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
300	COMMON	NO PAR VALUE	
If you desire, you may include a statement voting rights, and the qualifications, limitate State any provisions here (optional):			
3. The name and address of the initial re	egistered agent/office in Rhode Island	is:	
Agent Name BRIAN FORREST			
Street Address (NOT a P.O. Box) 728 VA	ALLEY STREET		
City/Town PROVIDENCE	State RHODE I	Zip Code 02908	
4. The corporation has the purpose of er or terminated in accordance with RIGL 7		naîl have 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

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BY CU BHXEC

5. Additional provisions, if any, not inconsistent with RIGL 7-Articles of Incorporation:	1.2 which the incorporators ele	ct to have set forth in these		
	Check the b	ox to indicate an attachment		
6. The name and address of each incomporator is:				
Name MICHAEL MCNULTY	Address 61 READ STREET			
City/Town SEEKONK	State MA	Zip Code 02771		
Năme	Address	·		
City/Town	State	Zip Gode		
Name	Address			
City/Town	State	Žip Code		
7. Date when these Articles of Incorporation will be effective: CHECK ONE BOX ONLY				
☑ Date received (Upon filing)  Leter 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.				
Type of Print Name of Incorporator MICHAEL MCNULTY		Date		
Signature of Incorporator  White Manager  Manage				
Type of Print Name of Incorporator		Date		
Signature of Incorporator				
Type or Print Name of Incorporator		Date		
Signature of Incorporator				

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, 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:

November 17, 2020 02:49 PM

Nellie M. Gorbea Secretary of State

Tulli U. Horler

