



State of Rhode Island
Department of State - Business Services Division

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BUS. SVCS. DIV.
2021 APR -9 11:50
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Certificate of Correction

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-1.2-105 the undersigned corporation hereby submits the following Certificate of Correction:

1. Entity ID Number: 001716948	2. The name of the corporation is: D.M.FASHION, INC.
3. The document to be corrected is: ARTICLES OF INCORPORATION	4. The date the document being corrected was originally filed: 12/31/2020
5. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgment: THE NAME LISTED IN SECTION 2 ABOVE WAS SPELLED INCORRECTLY IN THE ORIGINAL ARTICLES OF INCORPORATION FILED ON 12/31/2020 AS WELL AS THE CERTIFICATE OF CORRECTION FILED ON 1/6/2021. NEW ARTICLES OF INCORPORATION ARE ATTACHED. <p style="text-align: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></p>	
6. The new corrected portion of the document states as follows: THE CORRECT SPELLING OF THE NAME IS: <u>D.M.FASHION, INC.</u> D.M. Fashion, Inc. v Inc. <p style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></p>	
7. The corrected document MUST be attached to this certificate.	
8. As required by RIGL 7-1.2-105, the entity has paid all fees and taxes.	

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

FILED
APR 09 2021
BY **4513V5**
A.A. 11:50AM
FORM 113 - Revised 08/2020

Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.

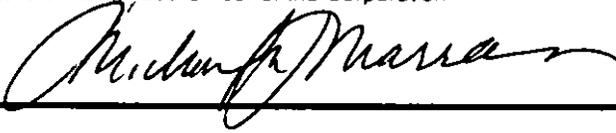
Type or Print Name of Authorized Officer of the Corporation

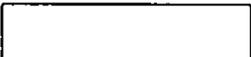
MICHAEL K. MARRAN, ESQ.

Date

3/31/2021

Signature of Authorized Officer of the Corporation





Articles of Incorporation
 DOMESTIC Business Corporation

STAMP

→ Filing Fee: \$230.00 minimum

The undersigned, acting as incorporator(s) of the corporation under RIGL 7-1.2-202, adopt(s) the following Articles of Incorporation for such corporation:



1. The name of the corporation is:
D.M.Fashion, Inc.

Is this a close corporation pursuant to RIGL 7-1.2-1701 of the General Laws, 1956, as amended? Yes No

2. The total number of shares which the corporation has the authority to issue is:
(Unless otherwise stated, all authorized shares are deemed to have a nominal or par value of \$0.01 per share.)

Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
100	Common	None
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 *(optional)*: Check the box to indicate an attachment

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

Agent Name **DONNA M FARRELL**

Street Address (NOT a P.O. Box) **300 INDIAN AVE**

City/Town PORTSMOUTH	State RHODE ISLAND	Zip Code 02871
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4. The corporation has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with RIGL 7-1.2.

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STAMP

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 MICHAEL K MARRAN	Address 55 CEDAR ST, SUITE 100	
City/Town PROVIDENCE	State RI	Zip Code 02903
Name	Address	
City/Town	State	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.

Type or Print Name of Incorporator MICHAEL K MARRAN	Date 03/31/2021
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Signature of Incorporator


Type or Print Name of Incorporator	Date
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Signature of Incorporator

Type or Print Name of Incorporator	Date
------------------------------------	------

Signature of Incorporator



State of Rhode Island
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,
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:

April 09, 2021 11:50 AM

A handwritten signature in blue ink that reads "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

