State of Rhode Island
Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV
2021 MAY 18 PM 12:20

Certificate of Correction

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: $10.00

Pursuant to the provisions of RIGL 7-6-41.1 the undersigned corporation hereby submits the following Certificate of Correction:

1. Entity ID Number:	2. The name of the corporation is:
001710976	Three in One Organization

3. The document to be corrected is:	4. The date the document being corrected was originally filed:
Articles of Incorporation, as amended	Sept. 8, 2020

5. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgment:

Set up churches and prayer centers; Conduct missionary activities; Organize charity work; Build a Christian institute for all ages.

Check the box to indicate an attachment ☐

6. The new corrected portion of the document states as follows:

Three in One Organization is organized exclusively for charitable, religious, and educational, purposes including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

Check the box to indicate an attachment ☑

7. The corrected document ***MUST*** be attached to this certificate.

12:20

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
MAY 18 2021
BY KF78X

8. The correction was adopted in the following manner: **CHECK ONE BOX ONLY**

☐ The correction was adopted at a meeting of the members held on _____, at which meeting a quorum was present, and the correction received at least a majority of the votes which members present or represented by proxy at such meeting were entitles to cast.

☐ The correction was adopted by a consent in writing on _____, signed by all members entitled to vote with respect thereto.

☑ The correction was adopted at a meeting of the Board of Directors held on May 17, 2021, and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

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	Date
Chang Du	May 18, 2021

Signature of Authorized Officer of the Corporation

Chang Du

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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2021 MAY 18 PM 12:20

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:
Three in One Organization

2. 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 is organized are:
Three in One Organization is organized exclusively for charitable, religious, and educational, purposes including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Upon dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

Check the box to indicate an attachment ☐

4. Provisions, if any, not consistent 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:
None

Check the box to indicate an attachment ☑

5 Name and address of the initial registered agent/office in Rhode Island is:

Agent Name
Chang Du

Street Address (NOT a P.O. Box)
132 Pitman Street, #2L

City	State	Zip Code
Providence	**RHODE ISLAND**	02906

12:20

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MAY 18 2021
BY

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

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
Chang Du	132 Pitman Street, #2L, Providence, RI 02906
Wen Ma	15722 Lydian Avenue, Cleveland, OH 44111
Ppei Yan Xiao	2320 Spencer Avenue, Pomona, CA 91767

Check the box to indicate an attachment ☐

7. The name and address of each incorporator is:

NAME	ADDRESS
Chang Du	132 Pitman Street, #2L, Providence, RI 02906

Check the box to indicate an attachment ☐

8. 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 30 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	Date
Chang Du	

Signature of Incorporator: Chang Du 05/17/2021

Type or Print Name of Incorporator	Date

Signature of Incorporator

Type or Print Name of Incorporator	Date

Signature of Incorporator

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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RI SOS Filing Number: 202196699820 Date: 5/18/2021 12:20:00 PM

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:

May 18, 2021 12:20 PM

Nellie M. Gorbea
Secretary of State