



State of Rhode Island
Department of State - Business Services Division

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2021 SEP 21 PM 12:17

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:
Steere Farm Elementary PTA

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:
The Steere Farm Elementary PTA is being organized to support the activities and educational needs of students and staff.
 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:
 Check the box to indicate an attachment

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

Agent Name
Holly Wright

Street Address (NOT a P.O. Box)
880 Lapham Farm Road

City Mapleville	State RHODE ISLAND	Zip Code 02839
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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 number of the initial Board of Directors of the Corporation is 4 (not less than 3 directors) and the names and address of the persons who are to serve as the initial directors are:

NAME	ADDRESS
Holly Wright	880 Lapham Farm Rd. Mapleville, RI 02839
Angela Knapp-Levesque	204 Pulaski Road, Harrisville, RI 02830
Stephanie Arpin	650 Cherry Farm Road, Harrisville, RI 02830
Melanie Page	23 Burrill Road, Harrisville, RI 02830

Check the box to indicate an attachment

7. The name and address of each incorporator is:

NAME	ADDRESS
Holly Wright	880 Lapham Farm Road, Mapleville, RI 02839

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 Holly Wright	Date 9-17-21
Signature of Incorporator <i>Holly Wright</i>	
Type or Print Name of Incorporator	Date 9-17-21
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:

September 21, 2021 12:17 PM

A handwritten signature in blue ink that reads "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

