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## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

→ Filing Fee: \$230.00 minimum

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

1. The name of the corporation is:			
Academy Liquor Corp.			
Academy Liquor Corp.			
Is this a close corporation pursuant	t to RIGL <u>7-1,2-1701</u> of the Ger	neral Laws, 1956, as	amended? <b>7</b> Yes No
<ol><li>The total number of shares which the (Unless otherwise stated, all author)</li></ol>			alue of \$0.01 per share.)
Total Authorized Shares (Number of Shares)	Class of Stock	P	ar Value Per Share
100	Common	\$0.01	
			<del></del>
If you desire, you may include a stateme			
voting rights, and the qualifications, limit State any provisions here (optional):	lations, or restrictions of them wh	•	be provisions of RIGL $7-1.2$ . box to indicate an attachment $\square$
State any provisions here (optionar).		Check the	Box to indicate an attachment
3. The name and address of the initial	registered agent/office in Rhod	le Island is:	
Agent Name _			
Frank J. Manni, Esq.			
Street Address ( <u>NOT</u> a P.O. Box)			
1405	5 Plainfield Street		
City/Town	State	· · · · · · · · · · · · · · · · · · ·	Zip Code 02919
Johnston	RI	HODE ISLAND	02919
4. The corporation has the purpose of	engaging in any lawful busines	s, and shall have per	petual existence until dissolved
or terminated in accordance with RIGI			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 1 8-2021 MP A.A. 3. 26pm

5. Additional provisions, if any, not inconsistent with RIGL <u>7-1.2</u> which the incorporators elect to have set forth in these Articles of Incorporation:				
		Check the box to indicate an attachment		
The name and address of each incorporator is:				
Name Geraldine Acosta	Address 231 Ferr	raris Street		
City/Town Copiague	State NY	Zip Code 11726		
Name	Address	•		
City/Town	State	Zip Code		
Name	Address	<u> </u>		
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 Geraldine Acosta	Date 10 12 2021			
Signature of Incorporator ) WINIMA AUSTO.				
Type or Print Name of Incorporator	Date			
Signature of Incorporator				
Type or Print Name of Incorporator		Date		
Signature of Incorporator		<u> </u>		