RI SOS Filing Number: 202105482420 Date: 11/29/2021 12:56:00 PM





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## **Articles of Incorporation**

**DOMESTIC Business Corporation** 

 $\rightarrow$  Filing Fee: \$230.00 minimum

1. The name of the corporation is:				
GET READY TO DATE DEC	LTD			
Is this a close corporation pursuan	nt to RIGL <u>7-1,2-1701</u> of the General Lav	vs, 1956, as amen	ded? 🗹 Ye:	s No
<ol><li>The total number of shares which t (Unless otherwise stated, all author)</li></ol>	he corporation has the authority to issue rized shares are deemed to have a nom	is: inal or par value o	f \$0.01 per sh	are.)
Total Authorized Shares (Number of Shares)	Class of Stock	Par Va	lue Per Share	· •
1000	NO PAR VALUE	D	2821	<u> </u>
	-		404	<u> </u>
		<del></del>	N	0,
			2	C7 (2)
If you desire, you may include a statem voting rights, and the qualifications, limi	ent of all or any of the designations and th	e power, preference	es, and rights,	including
If you desire, you may include a statem voting rights, and the qualifications, limi State any provisions here (optional):	ent of all or any of the designations and the itations, or restrictions of them which are p	e power, preference ermitted by the pro Check the box t	es, and rights, visions of RIG	<u>. 7-1:2</u>
voting rights, and the qualifications, limi	ent of all or any of the designations and thitations, or restrictions of them which are p	ermitted by the pro-	es, and rights, visions of RIG	<u>. 7-1:2</u>
voting rights, and the qualifications, limi	ent of all or any of the designations and th itations, or restrictions of them which are p	ermitted by the pro-	es, and rights, visions of RIG	Tachment
voting rights, and the qualifications, limi	ent of all or any of the designations and th itations, or restrictions of them which are p	ermitted by the pro-	es, and rights, visions of RIG	<u>. 7-1:2</u>
voting rights, and the qualifications, limi State any provisions here (optional):	itations, or restrictions of them which are p	ermitted by the pro Check the box t	es, and rights, visions of RIG	7-1:2.
voting rights, and the qualifications, limi State any provisions here (optional):	ent of all or any of the designations and th itations, or restrictions of them which are p	ermitted by the pro Check the box t	es, and rights, visions of RIG	7-1:2.
voting rights, and the qualifications, limi State any provisions here (optional):  3. The name and address of the initia Agent Name DEBRA-JEANNE DROP	itations, or restrictions of them which are p Il registered agent/office in Rhode Island	ermitted by the pro Check the box t	es, and rights, visions of RIG	7-1:2.
voting rights, and the qualifications, limi State any provisions here (optional):  3. The name and address of the initia Agent Name	itations, or restrictions of them which are p Il registered agent/office in Rhode Island	ermitted by the pro Check the box t	es, and rights, visions of RIG	7-1/2.  Trachment Sin V 29 P 1 12: 5

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

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5. Additional provisions, if any, not inconsistent with RI Articles of Incorporation:	GL <u>7-1.2</u> which the incor	porators elect to have set forth in these		
	•			
	,	Shaaladha baasha ad ada a a an an an an a		
6. The name and address of each incorporator is:		Check the box to indicate an attachment		
Name DEBRA-JEANNE DROHAN L'HEURUEX	Address 310 MAP	Address S-A 310 MAPLE AVE SUITE LOG-E		
City/Town BARRINGTON	State RI	Zip Code 02806		
Name ROBERT A FEDERICO CPA	Address 651 FALI	dress 651 FALL RIVER AVE		
City/Town SEEKONK	State MA	Zip Code 02771		
Name	Address			
City/Town	State	Zip Code		
7. Date when these Articles of Incorporation will be effe	ective: CHECK ONE BO	X ONLY		
✓ Date received (Upon filing)				
Later effective date (Date must be no more than S	90 days from the date of	filing)		
Under penalty of perjury, I/we declare and affirm that I/ accompanying attachments, and that all statements co				
Type or Print Name of Incorporator	Date			
DEBRA-JEANNE DROHAN L'HEUREUX	11/11/2021			
Signature of Incorporator	<u> </u>			
Deha Jeanne Drohan L'	Heuneux			
Type or Print Name of Incorporator	Date			
ROBEERT A FEDERICO CPA	11/11/2021			
Signatura of Incorporator	CPA	•		
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 29, 2021 12:56 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

