

**Department of State - Business Services Division**

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A.A. 4:07 p.m.  
FORM 113 - Revised 12/2021

*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.*

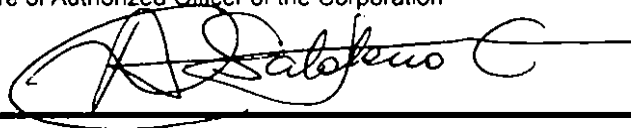
Type or Print Name of Authorized Officer of the Corporation

Date

Alicia Saldana

12/19/2022

Signature of Authorized Officer of the Corporation

A handwritten signature in black ink, appearing to read 'A. Saldana', with a long horizontal flourish extending to the right.



State of Rhode Island

## Department of State - Business Services Division

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BUS SVCS DIV2023 JAN 30 PM 4:07  
2023 JAN -3 PM 2:32

## Articles of Incorporation

## DOMESTIC Business Corporation

→ 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:

Qhali Corporation

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
1000	CNP	\$0.00

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  
Alicia SaldanaStreet Address (NOT a P.O. Box)  
34 Gooding AvenueCity/Town  
BristolState  
RHODE ISLANDZip Code  
02809

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.

## MAIL TO:

## Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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 ☐

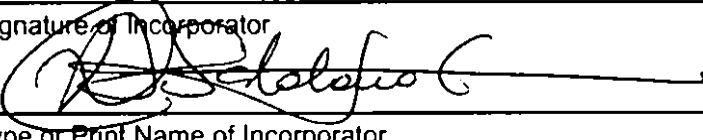
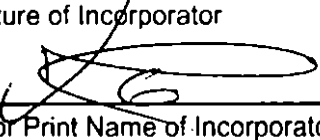
6. The name and address of each incorporator is:

Name Alicia Saldana	Address 30 Parkside Place #310	
City/Town Malden	State MA	Zip Code 02148
Name Mirko S Garces Rojas	Address 30 Parkside Place #310	
City/Town Malden	State MA	Zip Code 02148
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 Alicia Saldana	Date 12/19/2022
Signature of Incorporator 	
Type or Print Name of Incorporator Mirko S Graces Rojas	Date 12/19/2022
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**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, 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:

January 30, 2023 04:07 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

