



2023 MAR 20 -PM 3: 27

## **Articles of Amendment**

**DOMESTIC Non-Profit Corporation** 

→ Filing Fee: \$10.00

| Pursuant to the provisions of RIGL <u>7-6-40,</u> of Amendment to its Articles of Incorporation                                    | the undersigned corporation adopts the in: | following Articles                    |  |
|--|--|---------------------------------------|--|
| 1. Entity ID Number: 2. The  | name of the corporation is:                |                                       |  |
| 27079 B  | arrington Public Library Corpora           | tion                                  |  |
| If the entity's name is changing, state the new name:  |  |                                       |  |
| Barrington Public Library Fou  | ndation                                    | Check the box to indicate no change   |  |
| 4. If the period of its duration is changing complete the following section: CHECK ONE BOX ONLY                                    |  |                                       |  |
| Perpetual (on-going)   |  |                                       |  |
| Date certain for dissolution Check the box to indicate no change   |  |                                       |  |
| Check the box to indicate an attachment  |  | Check the box to indicate no change ☑ |  |
| If the number of directors is increasing or decreasing (not less than 3 directors), state the number of directors in this section: |  |                                       |  |
| *List ALL directors as of this amendment   |  |                                       |  |
| NAME   | ADDRESS                                    |                                       |  |
| Vincent Wicker   | 31 Broadview Drive, Barrington             | RI 02806                              |  |
| Cindy Kaplan   | 5 Karen Drive, Barrington RI 02            | 806                                   |  |
| Frances Rasmussen  | 4 Shady Lane, Barrington RI 02             | 806                                   |  |
| Check the box to indicate an attachment  |  | Check the box to indicate no change   |  |

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 STAME

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| 7. If adding or amending additional provisions, complete the following section:  |                               |  |  |
|--|-------------------------------|--|--|
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|  | the box to indicate no change |  |  |
| 8. The amendment was adopted in the following manner: CHECK ONE BOX ONLY   |                               |  |  |
| The amendment was adopted at a meeting of the members held on <u>February 16, 2023</u> , at which meeting a quorum was present, and the amendment received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast. |                               |  |  |
| The amendment was adopted by a consent in writing on, signed by all members entitled to vote with respect thereto.   |                               |  |  |
| The amendment was adopted at a meeting of the Board of Directors held on, and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.  |                               |  |  |
| 9. Date when these Articles of Amendment 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 declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.  |                               |  |  |
| Type or Print the Name of the Non-Profit Corporation   |                               |  |  |
| Barrington Public Library Foundation   |                               |  |  |
| Type or Print Name of the President █ OR Vice President □  | Date                          |  |  |
| Vincent Wicker   | 1/18/2013                     |  |  |
| Signature of President Vice President  | 700,000                       |  |  |
| Thursday.  | /                             |  |  |
| Type or Print Name of the Secretary OR Assistant Secretary   | Date                          |  |  |
| Frances Rasmussen  | 2.32.23                       |  |  |
| Signature of the Secretary OR Assistant Secretary  |                               |  |  |
| Francis Ausmosa  |                               |  |  |

TWO SIGNATURES ARE REQUIRED