State of Rhode Island Department of State - Business Services	Division		
		RECEIVED	
	R.I.,	DEPT. OF STATE	
Articles of Incorporation DOMESTIC Non-Profit Corporation			
→ Filing Fee: \$35.00	2023	NAY 15 A 11: 05	
The undersigned, acting as incorporator(s) of a corporation u following Articles of Incorporation for such corporation:	inder RIGL <u>7-6-34</u> , adopt(s) the	•	
1. The name of the corporation is:			
under your	Wings	ministry	
2. The period of its duration is: CHECK ONE BOX ONLY			
Perpetual (on-going)			
Date certain for dissolution		and the second	
3. The specific purpose or purposes for which the corporation $D + S + C + S + C + C + C + C + C + C + C$			
IS a communi focus on helping the	community w	i Hn Ford, Clothe box to indicate an attachment	
4. Provisions, if any, not inconsistent 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 Agent Name			
Melanpava	IP XD		
Street Address (NOT a P.O. Box)	00		
city a room free a rive	State	Zip Code	
Providence	RHODE ISLAND	ODSOR	
• • • • • • • • • • • • • • • • • • • •			
MAIL TO:	Ŵ	3 FILED 1105	
Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615		MAY 1 5 2023	
Phone: (401) 222-3040 Website: www.sos.ri.gov	8	Y 6 FRSWird The	

FORM 200 - Revised 12/2021

6. The number of the initial Board of Direct		ectors) and the names and	
address of the persons who are to serve as		·····	
NAME	ADDRESS		
Natanal VallAR	23 Homefield Aup	M.KI UZ28	
Remonite lopez	202 Metrosp st Pro	V.RI 02907	
William Tepida	48 Edgemose Ave. Prz	N.RI 02909	
· · · · · · · · · · · · · · · · · · ·			
Check the box to indicate an attachment			
7. The name and address of each incorporator is:			
NAME	ADDRESS		
Melania Vallep 23 Homefield AU. PRVidence PT 1008			
	V		
	Check the box to		
Check the box to indicate an attachment			
8. Date when these Articles of Incorporation will be effective: CHECK ONE BOX ONLY			
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		Date	
Melanea	valleio	05/15/2023	
Signature of Incorporator			
Type or Print Name of Incorporator	hange	Date	
	v		
Signature of Incorporator			
Type or Print Name of Incorporator		Date	
Signature of Incorporator			

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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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:

May 15, 2023 11:05 AM

Treng M. Course

Gregg M. Amore Secretary of State

