



RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIVISION
 2023 MAY 15 A 11:05

Articles of Incorporation
 DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL 7-6-34, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is:		
under your wings ministry		
2. The period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
3. The specific purpose or purposes for which the corporation is organized are: <i>and promote & at such as homeless the gospel</i>		
IS a community outreach that focus on helping the community with food, clothes		
Check the box to indicate an attachment <input type="checkbox"/>		
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 <input type="checkbox"/>		
5. Name and address of the initial registered agent/office in Rhode Island is:		
Agent Name <i>Melanea Vallejo</i>		
Street Address (NOT a P.O. Box) <i>23 Homefield Ave</i>		
City <i>Providence</i>	State RHODE ISLAND	Zip Code <i>02908</i>

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

m3 FILED 1105
MAY 15 2023
 BY 6GRSW

6. The number of the initial Board of Directors of the Corporation is 3 (not less than 3 directors) and the names and address of the persons who are to serve as the initial directors are:

NAME	ADDRESS
Nataaniel Valles	23 Homefield Ave Prov. RI 02908
Ramonita Lopez	202 Melrose St Prov. RI 02907
William Tejada	48 Edgemore Ave. Prov. RI 02909

Check the box to indicate an attachment

7. The name and address of each incorporator is:

NAME	ADDRESS
Melanea Valles	23 Homefield Av. Providence RI 02908

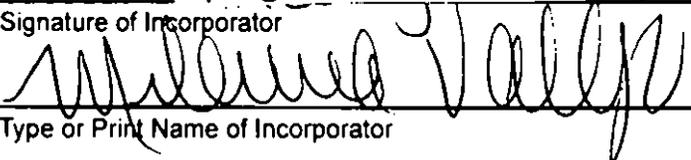
Check the box to indicate an attachment

8. 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 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 <u>Melanea Vallejo</u>	Date <u>05/15/2023</u>
--	---------------------------

Signature of Incorporator 
--

Type or Print Name of Incorporator	Date
------------------------------------	------

Signature of Incorporator

Type or Print Name of Incorporator	Date
------------------------------------	------

Signature of Incorporator
