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2023 MAY 22 PM 2: 28, .

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation unfollowing Articles of Incorporation for such corporation:	nder RIGL <u>7-6-34</u> , adopt(s) the	
1. The name of the corporation is:		
Rhode Island Hispanic Chamber of Commo	erce Foundation	
2. The period of its duration is: CHECK ONE BOX ONLY		_
Perpetual (on-going)		
Date certain for dissolution		
3. The specific purpose or purposes for which the corporatio	n is organized are:	
The organization is organized exclusively for charitable, religious, educational and scientific purposes, including for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(C)(3) of the Internal Revenue code, or corresponding section of any future federal tax code. The principal purpose of the Foundation is to improve the economic status and competitiveness of the Rhode Island Hispanic business community by supporting		
the mission of the Rhode Island Hispanic Cha	mber of Commerce.	ا
·	Check the box to indic	
4. Provisions, if any, not inconsistent with the law, which the for the regulation of the internal affairs of the corporation are		ticles of Incorporation
No substantial part of the activities of the corporat	ion shall be the carrying on of prop	oaganda, or
otherwise attempting to influence legislation, and	•	
in (including the publishing or distribution of stater		•
E Name and address of the initial analysis of an attack	Check the box to indicate	cate an attachment i
Name and address of the initial registered agent/office in Information	Rhode Island Is:	
Robert E. Craven, Esq.		
Street Address (<u>NOT</u> a P.O. Box) 7405 Post Road		
City North Kingstown	State Zin Code	02852
MAIL TO:	FILED	ם עון דר

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAY 22 2023

NAME '	e as the initial directors are:		
	ADDRESS		
Oscar Mejias, Director	11 Anderson Ave. North Providen	11 Anderson Ave. North Providence, RI 02904	
Carol Aguasvivas, Director	143 Woodbine st, Cranston, RI 02	143 Woodbine st, Cranston, RI 029010	
Christopher Calderon, Director	72 Powhatan Street Warwick, RI 02889		
	Check	the box to indicate an attachment	
7. The name and address of each incor	porator is:		
NAME	ADDRESS		
Luis Torrado,	85 Brookridge Drive Exeter, RI 02822_		
Elvis Santana,	62 Wolf Hill Rd. Smithfield, RI 02917		
Dariel Blanco,	522 Pleasant Valley Parkway 2nd Floor Providence,RI 02908		
	Checiation will be effective: CHECK ONE BOX ONL	k the box to indicate an attachment	
Under penalty of perjury, I/we declare a	no more than 30 days from the date of filing) nd affirm that I/we have examined these Articl I statements contained herein are true and co	es of Incomoration, including any	
Under penalty of perjury, I/we declare a		es of Incompration, including any	
Under penalty of perjury, I/we declare as accompanying attachments, and that all	nd affirm that I/we have examined these Articl	es of Incorporation, including any rrect.	
Under penalty of perjury, I/we declare as accompanying attachments, and that all Type or Print Name of Incorporator	nd affirm that I/we have examined these Articl	es of Incorporation, including any mect.	
Under penalty of perjury, I/we declare as accompanying attachments, and that all Type or Print Name of Incorporator Luis Torrado	nd affirm that I/we have examined these Articl	es of Incorporation, including any mect. Date 5/08/23	
Under penalty of perjury, I/we declare all accompanying attachments, and that all Type or Print Name of Incorporator Luis Torrado Signature of Incorporator	nd affirm that I/we have examined these Articl	Date Date Date	
Under penalty of perjury, I/we declare an accompanying attachments, and that all Type or Print Name of Incorporator Luis Torrado Signature of Incorporator Type or Print Name of Incorporator	nd affirm that I/we have examined these Articl	es of Incorporation, including any mect. Date 5/08/23	
Under penalty of perjury, I/we declare as accompanying attachments, and that all Type or Print Name of Incorporator Luis Torrado Signature of Incorporator Type or Print Name of Incorporator Elvis Santana	nd affirm that I/we have examined these Articl	Date Date 5/08/23	
Under penalty of perjury, I/we declare an accompanying attachments, and that all Type or Print Name of Incorporator Luis Torrado Signature of Incorporator Type or Print Name of Incorporator Elvis Santana Signature of Incorporator	nd affirm that I/we have examined these Articl	es of Incorporation, including any mect. Date 5/08/23	

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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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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 22, 2023 02:28 PM

Gregg M. Amore Secretary of State

Treg M. Coure

