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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
The name of the corporation is:	
Rhode Island Hispanic Chamber of Comm	erce Foundation
2. The period of its duration is: CHECK ONE BOX ONLY	
Perpetual (on-going)	<u> </u>
Date certain for dissolution	
3. The specific purpose or purposes for which the corporatio	n is organized are:
including for such purposes, the making of distribitions under section 501(C)(3) of the Interfuture federal tax code. <b>The principal purpose o</b>	nal Revenue code, or corresponding section of any f the Foundation is to improve the economic and Hispanic business community by supporting
	Check the box to indicate an attachment
4. Provisions, if any, not inconsistent with the law, which the for the regulation of the internal affairs of the corporation are	incorporators elect to set forth in these Articles of Incorporation :
No substantial part of the activities of the corporat otherwise attempting to influence legislation, and in (including the publishing or distribution of stater	the corporation shall not participate in, or intervene
5. Name and address of the initial registered agent/office in I	Rhode Island is:
Agent Name Robert E. Craven, Esq.	
Street Address (NOT a P.O. Box) 7405 Post Road	
City North Kingstown	State Zin Code RHODE ISIL AVV 02852

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

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 029	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.