State of Rhode Island							
/ 13#/ X	e - Business Services	Division					
Certificate of Correction DOMESTIC or FOREIGN Bu → Filing Fee: \$50.00 Pursuant to the provisions of RIGI following Certificate of Correction:	usiness Corporation L 7-1.2-105 the undersioned	corporation hereby submits the	R.I. DEPT. OF STATE BUS SVCS DIV				
1. Entity ID Number:	2. The name of the corpora						
001740934	Punchbowl Develo	ppment Corporation					
3. The document to be corrected	be corrected is: 4. The date the document being corrected was or		ted was originally				
Articles of Incorporation		filed: 5/22/2023					
Specify the inaccurate record of	of the corporate action or the	defective or erroneous execution, seal of	or acknowledgment:				
The Corporation hereby removes Richard Dale as an incorporator of the Corporation. He was included in the incorporation of the Corporation without his authorization and knowledge and, as such, never agreed to ownership of, or participation in, said corporation. This amended filing is designed to address that error.							
0.71		Check the box to indica	ale an atlachment 🔲				
6. The new corrected portion of the Remove Richard Dale as an Steven Perry should be the	n incorporator of the cor	poration.					
		Check the box to indicate	le an attachment 🔲				
7. The corrected document MUST	be attached to this certificat	e.					

MAIL TO:

Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

8. As required by RIGL 7-1.2-105, the entity has paid all fees and taxes.

Phone: (401) 222-3040 Website: www.sos.ri.gov 8:31 FILED

JUL 06 2023

By Online filing

Y.M.

FORM 113 - Revised: 12/2021

Under penalty of perjury, I declare and affirm that I have examined this a accompanying attachments, and that all statements contained herein ar	Certificate of Correction, including any
Type or Print Name of Authorized Officer of the Corporation Steven Perry	Date 07/03/2023
Signature of Authorized Officer of the Corporation Steven Perry 6772973 1008 AM FD* 1774 AMPLIAND THE	- <u> </u>



Articles of Incorporation DOMESTIC Business Corporation				אר במנ הוא אם ירע הוא
→ Filing Fee: \$230.00 minimum		SECE SV SV		
The undersigned, acting as incorporator(s) of adopt(s) the following Articles of Incorporation				OF SIL
The name of the corporation is:				1E
Punchbowl Development Corpo	oration			
Is this a close corporation pursuant to RI	GL <u>7-1.2-1701</u> c	of the General Laws, 195	i6, as amended?	Yes No
The total number of shares which the corp (Unless otherwise stated, all authorized s			par value of \$0.0	1 per share.)
Total Authorized Shares (Number of Shares)	Class of	Stock	Par Value Pe	er Share
1,000.00	CNP		0.0000	
				
If you desire, you may include a statement of a voting rights, and the qualifications, limitations State any provisions here (optional):		f them which are permitted	d by the provisions	
Real estate property purchase, sale	and developr	ment		
3. The name and address of the initial regist	ered agent/office	e in Rhode Island is:		
Agent Name Steven H. Surdut				
Street Address (<u>NOT</u> a P.O. Box) 43 Broad	d Street			
City/Town Westerly		State RHODE ISLAND	Zip Code	02891

4. The corporation has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved

RHODE ISLAND

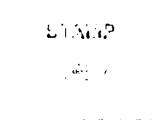
MAIL TO:

Division of Business Services

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

or terminated in accordance with RIGL 7-1.2.

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



Additional provisions, if any, not inconsistent with RIGL Articles of Incorporation:	. <u>7-1.2</u> which the inco	orporators elect to have set forth in these	
		Check the box to indicate an attachment	
The name and address of each incorporator is:		Check the box to indicate an attachment	<u> </u>
Name Steven Perry		ane Street	
City/Town Providence	State RI	Zip Code 02906	
Name	Address		
City/Town	State	Zip Code	_
Name	Address	<u> </u>	
City/Town	State	Zip Code	
7. Date when these Articles of Incorporation will be effect	ive: CHECK ONE 80	BOX ONLY	
✓ Date received (Upon filing)☐ Later effective date (Date must be no more than 90 continuous)	days from the date o	of filing)	
8. Under penalty of perjury, I/we declare and affirm that I/accompanying attachments, and that all statements contains.			ıy
Type or Print Name of Incorporator	Date		
Steven Perry			
Signature of Incorporator			
Steven Perry 9705/272 38	A PILI FOT		
Type or Print Name of Incorporator		Date	
Signature of Incorporator			
Type or Print Name of Incorporator		Date	
Signature of Incorporator			