



State of Rhode Island

Department of State - Business Services Division

Articles of Amendment

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$10.00

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R.I. DEPT. OF STATE
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Pursuant to the provisions of RIGL 7-6-40, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation:

1. Entity ID Number: 001757164	2. The name of the corporation is: Embrace RI
3. If the entity's name is changing, state the new name: Check the box to indicate no change <input checked="" type="checkbox"/>	
4. If the period of its duration is changing complete the following section: CHECK ONE BOX ONLY <input type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____ Check the box to indicate no change <input checked="" type="checkbox"/>	
5. If the entity's purpose is changing complete the following section: <i>*The new purpose should include ALL activity to be transacted in the State of Rhode Island.</i> The organization is organized exclusively for charitable and educational purposes under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code. Upon the dissolution, Embrace RI's remaining assets will be used exclusively for section 501(c)(3) exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box to indicate an attachment <input type="checkbox"/> Check the box to indicate no change <input type="checkbox"/>	
6. If the number of directors is increasing or decreasing (not less than 3 directors), state the number of directors in this section: *List ALL directors as of this amendment TABLE: NAME ADDRESS Check the box to indicate an attachment <input type="checkbox"/> Check the box to indicate no change <input checked="" type="checkbox"/>	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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JUL 26 2023

BY

DVTHY

FORM 201 - Revised 12/2021

11:18

7. If adding or amending additional provisions, complete the following section:

Check the box to indicate an attachment ☐

Check the box to indicate no change ☒

8. The amendment was adopted in the following manner: **CHECK ONE BOX ONLY**

- ☒ The amendment was adopted at a meeting of the members held on 7/24/23, at which meeting a quorum was present, and the amendment received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.
- ☐ The amendment was adopted by a consent in writing on _____, signed by all members entitled to vote with respect thereto.
- ☐ The amendment was adopted at a meeting of the Board of Directors held on _____, and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

9. Date when these Articles of Amendment 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 declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print the Name of the Non-Profit Corporation

Embrace RI

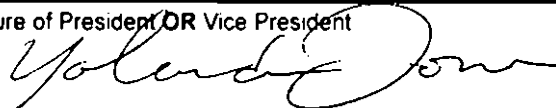
Type or Print Name of the President ☐ OR Vice President ☒

Yolanda Jones

Date

7/26/23

Signature of President OR Vice President



Type or Print Name of the Secretary ☐ OR Assistant Secretary ☐

Desiree Soto

Date

7/26/23

Signature of the Secretary OR Assistant Secretary



TWO SIGNATURES ARE REQUIRED

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.