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State of Rhode Island Department of State - Business Services Division

	RECEIVED R.I. DEPT. OF STÁÐ AM I
rticles of Incorporation	BUS SYOS OF

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: GGCCPROVIDENCE				
2. The period of its duration is: CHECK ONE BOX ONLY				
Perpetual (on-going)				
Date certain for dissolution	Date certain for dissolution			
3. The specific purpose or purposes for which the corporation is organized are:				
Church. Christian ministry				
Check the box to indicate an attachment				
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				
5. Name and address of the initial registered agent/office in Rhode Island is:				
Agent Name Joseph Milanovich				
Street Address (NOT a P.O. Box) 11401024 ST-Profile Color				
city PROvidence	State RHODE ISLAND	Zip Code 0 2 9 0 6		

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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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 JOSEPH MILANDVICH	ADDRESS 114 OINEY STARDVIDEN	ce. RI 02900		
Louis Milanovich	909 newPort Ave. Attleb	or0, MA02903		
Lisa Jace	909 newport Ave, Attle	boro, MA 02903		
	Check the box to	indicate an attachment		
7. The name and address of each incorpor	† · · · · · · · · · · · · · · · · · · ·			
NAME	ADDRESS	-		
Joseph Milanovich	114 oiney St. PROvida	ence/RI		
	02906			
	Check the box to	indicate an attachment 🔲		
8. Date when these Articles of Incorporatio	n 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)				
	nd affirm that I/we have examined these Articles of Inc atements contained herein are true and correct.	orporation, including any		
Type or Print Name of Incorporator		Date		
Joseph Milanovich		11/22/23		
Signature of Incorporator				
Type or Print Name of Incorporator		Date		
Signature of Incorporator				
Type or Print Name of Incorporator		Date		
Signature of Incorporator				
1				

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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:

November 22, 2023 03:14 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

