



State of Rhode Island
Department of State - Business Services Division

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
FOR SECRETARY OF STATE
2023 DEC -5 PM 20

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL 7-6-34, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is: MINORITY HOUSING & FINANCE FOUNDATION		
2. The period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
3. The specific purpose or purposes for which the corporation is organized are: TO HELP MINORITY BUSINESSES WITH FUNDING AND FINANCIAL MATTERS		
Check the box to indicate an attachment <input type="checkbox"/>		
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 <input type="checkbox"/>		
5. Name and address of the initial registered agent/office in Rhode Island is:		
Agent Name RAYMOND J ZINO		
Street Address (NOT a P.O. Box) 350 CRANSTON ST		
City PROVIDENCE	State RHODE ISLAND	Zip Code 02907

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
STAMP
DEC 05 2023
SECRETARY OF STATE
BY ML 53724

4:20

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	ADDRESS
RAYMOND ZUNO	350 CRANSTON ST PROVIDENCE RI 02907
LISA MONTY	1000 BROAD ST PROVIDENCE RI 02905
JASON SMITH	1000 BROAD ST PROVIDENCE RI 02905

Check the box to indicate an attachment

7. The name and address of each incorporator is:

NAME	ADDRESS
RAYMOND ZUNO	350 CRANSTON ST PROVIDENCE RI 02905

Check the box to indicate an attachment

8. Date when these Articles of Incorporation 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) _____

9. Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Incorporator	Date
RAYMOND ZUNO	12-05-23
Signature of Incorporator 	
Type or Print Name of Incorporator	Date
Signature of Incorporator	
Type or Print Name of Incorporator	Date
Signature of Incorporator	

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.



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

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:

December 05, 2023 04:20 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

