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State of Rhode Island

Department of State - Business Services Division

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

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2023 DEC 11 P 3: 05

The undersigned, acting as incorporator(s) of a corporation unde following Articles of Incorporation for such corporation:	er RIGL 7-6-34, adopt(s) the	
1. The name of the corporation is:		
Boat loads	s of GiVIN	()
2. The period of its duration is: CHECK ONE BOX ONLY		<u> </u>
Perpetual (on-going)		
Date certain for dissolution		
3. The specific purpose or purposes for which the corporation is organized are: Phontable Suppose and Presupces to families who have lust loved one's due to Con Noveme. Book loads of Utilities at the offer finantial assistance to families affected by Gun November this assistance can Beutilized for various needs Such as burial services, College tuition, having expressy		
	Check the b	oox 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: ANUAL BOOK 1000 OF GWIND FUNCTIONSTRICE (ELEBRATION) ACCUMBATE BOOK TRUSTED MANAGES TO MINIOUS INCOME OF CONTROLS ACCUMBATE BOOK TRUSTED MANAGES TO MINIOUS INCOME OF CONT		
	Check the b	pox to indicate an attachment
5. Name and address of the initial registered agent/office in Rho	ode Island is:	
Agent Name Joshus Phobuson		
Street Address (NOT a P.O. Box) 22 WEST PACK PAGE		
City 2000 of/1 1 At 20 cont	tate RHODE ISLAND	Zip Code

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**

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6. The number of the initial Board of Direct address of the persons who are to serve as		
NAME	ADDRESS	
someter Cax	Thurst PARK PIGCE, WOONSOCKET, RI Mr WEST PARK PIGCE, WOONSOCKET, RI	
Jayme Nathaniel	22 WEST PARK PIGCE, WUNTSUKE, RI	
Joshua Minusun	In west park place flownsaket nt	
	Check the box to indicate an attachment	
7. The name and address of each incorporator is:		
NAME	ADDRESS	
JOSHUA RADIUSON	Muest Park Place, wowocker, not own	
,	, , , , , , , , , , , , , , , , , , , ,	
_	Check the box to indicate an attachment	
8. Date when these Articles of Incorporatio	on 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	
Joshua Robinson	12 11/23	
Signature of Incorporator Author Month		
Type or Print Name of Incorporator	Date	
- '		
Signature of Incorporator		
Type or Print Name of Incorporator	Date 1	
<u> </u>	1211123	
Signature of Incorporation		
- <u>r</u>	>	

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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:

December 11, 2023 03:05 PM

Gregg M. Amore

Secretary of State

Treg M. Coure

