



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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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: <div style="font-size: 1.2em; margin-top: 10px;">Inner Circle Multicultural Center</div>		
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: <div style="font-size: 1.2em; margin-top: 10px;">To help individuals with services as paying bills, filling out applications online and any other needs that they may need.</div> <div style="text-align: right; margin-top: 10px;">Check the box to indicate an attachment <input type="checkbox"/></div>		
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: <div style="text-align: right; margin-top: 10px;">Check the box to indicate an attachment <input type="checkbox"/></div>		
5. Name and address of the initial registered agent/office in Rhode Island is:		
Agent Name <div style="font-size: 1.2em; margin-top: 5px;">Sandra M. Kinosh</div>		
Street Address (NOT a P.O. Box) <div style="font-size: 1.2em; margin-top: 5px;">80 Whitmarsh St</div>		
City <div style="font-size: 1.2em; margin-top: 5px;">Providence</div>	State <div style="font-size: 1.2em; margin-top: 5px;">RHODE ISLAND</div>	Zip Code <div style="font-size: 1.2em; margin-top: 5px;">02907</div>

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	ADDRESS
Sandra Lincoln	80 Whitmarsh St Prov RI 02907
Breana Lincoln	80 Whitmarsh St Prov RI 02907
Dale Santos	Post Office Box 40037 Prov RI 02940

Check the box to indicate an attachment ☐

7. The name and address of each incorporator is:

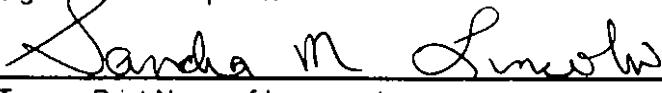
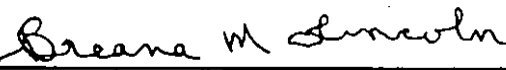
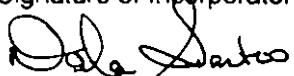
NAME	ADDRESS
Sandra M Lincoln	80 Whitmarsh St Prov RI 02907
Breana M Lincoln	80 Whitmarsh St Prov RI 02907
Dale Santos	Post Office Box 40037 Prov RI 02940

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
Sandra M Lincoln	1-2-24
Signature of Incorporator	
	
Type or Print Name of Incorporator	Date
Breana M Lincoln	1-2-24
Signature of Incorporator	
	
Type or Print Name of Incorporator	Date
Dale Santos	1-2-24
Signature of Incorporator	
	



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:

January 02, 2024 10:29 AM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

