State of Rhode Island Department of State - Business Services	s Division	RECTORIDOS BSI 724 FEB 8 PM4:01 ST		
Articles of Incorporation DOMESTIC Business Corporation		SIGGP		
→ Filing Fee: \$230.00 minimum		SECRETARY OF STATE USE ONLY		
•				
The undersigned, acting as incorporator(s) of the corporation under RIGL <u>7-1,2-202</u> , adopt(s) the following Articles of Incorporation for such corporation:				
1. The name of the corporation is:				
TJ TRee Landscope Disp	bial Experts	INC.		
Check if this a close corporation pursuant to RIGL 7-1.2-1701 of the General Laws, 1956, as amended.				
<ol> <li>The total number of shares which the corporation has the authority to issue is: (Unless otherwise stated, all authorized shares are deemed to have a nominal or par value of \$0.01 per share.)</li> </ol>				
Total Authorized Shares Class of (Number of Shares)	Stock Pa	ar Value Per Share		
		-0		
If you desire, you may include a statement of all or any of the d voting rights, and the qualifications, limitations, or restrictions o State any provisions here ( <i>optional</i> ):	f them which are permitted by th			
3. The name and address of the initial registered agent/office	e in Rhode Island is:			
Agent Name TIMOTHY A JAWO ISIS				
Street Address (NOT a P.O. Box)				
46 loger williams Ave				
City/Town FSF PAUN	State RHODE ISLAND	Zip Code O2916		
4. The corporation has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with RIGL 7-1,2.				
		FILED		
MAIL TO:		FEB 08 2024		
Division of Business Services		BYMITAMZNE		
148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov		IOR SECRETARY OF SATE USE OF SATE		

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5. Additional provisions, if any, not inconsistent with RIGL <u>7-1.2</u> which the incorporators elect to have set forth in these Articles of Incorporation:			
	Check the b	ox to indicate an attachment 🔲	
6. The name and address of each incorporator is:			
Name	Address		
Tin slige VAWOrshi	46 Royer Williams Ave		
City/Town ( E RUMFORN	State	Zip Code 02916	
Name	Address		
City/Town	State	Zip Code	
Name	Address		
City/Town	State	Zip Code	
7. 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 90 days from the date of filing)			
8. 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 10/2	
TIMETRY & JAWOISNI		2/8/2Y	
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.

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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:

February 08, 2024 04:01 PM

Areg M. Couve

Gregg M. Amore Secretary of State

