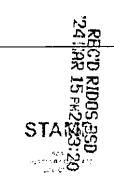
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State of Rhode Island **Department of State - Business Services Division**



Articles of Incorporation DOMESTIC Business Corporation

→ Filing Fee: \$230.00 minimum

1. The name of the corporation i	ncorporation for such corporation: s:		
VONSOL Construction	, Inc.		
Check if this a close corpora	tion pursuant to RIGL 7-1,2-1701 of the Ger	neral Laws, 1956, as amended.	
2. The total number of shares w	nich the corporation has the authority to issu authorized shares are deemed to have a not	ue is:	
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
100	CNP	0	
	tatement of all or any of the designations and statement of all or restrictions of them which are		
voting rights, and the qualification. State any provisions here (options)	s, limitations, or restrictions of them which are	permitted by the provisions of RIGL 7-1.2. Check the box to indicate an attachment	
voting rights, and the qualification. State any provisions here (options) 3. The name and address of the Agent Name Daniel M. Gauv	s, limitations, or restrictions of them which are all: initial registered agent/office in Rhode Islan	permitted by the provisions of RIGL <u>7-1.2</u> . Check the box to indicate an attachment	
voting rights, and the qualification. State any provisions here (options) 3. The name and address of the	s, limitations, or restrictions of them which are all: initial registered agent/office in Rhode Islan	permitted by the provisions of RIGL 7-1.2. Check the box to indicate an attachment	

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

or terminated in accordance with RIGL 7-1.2.

Phone: (401) 222-3040 Website: www.sos.n.gov

FORM 100- Revised: 12/2023

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:				
	Ch	eck the box to indicate an attachment		
The name and address of each incorporator is:	Ladding			
Name Daniel M. Gauvin	Address 45 Carriage Hill Road			
City/Town Scituate	State RI	Zip Code 02857		
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			
Daniel M. Gauvin		03/15/2024		
Signature of Incorporator				
Type or Print Name of Incorporator		Date		
Signature of Incorporator				
Type or Print Name of Incorporator		Date		
Signature of Incorporator				

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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:

March 15, 2024 02:23 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

