



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation**

**Application for Certificate of Authority**

(Section 7-6-74 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

1. The name of the corporation is POSTPARTUM SUPPORT, INTERNATIONAL

1(a). The name, if different, which it elects to use in Rhode Island is:

*Note: If 1(a) is completed, a "Fictitious Business Name Statement" is required to be filed with this application*

**SECTION II**

It is incorporated under the laws of State: CA Country: USA

**SECTION III**

The date of its incorporation is 1/18/1989

and the period of its duration is  Perpetual  Date certain for dissolution

**SECTION IV**

The address of its principal place of business is:

No. and Street: 6706 SW 54TH AVENUE

City or Town: PORTLAND

State: OR

Zip: 97219

Country: USA

**SECTION V**

The address of its proposed registered office in Rhode Island is:

No. and Street: 222 JEFFERSON BOULEVARD

SUITE 200

City or Town: WARWICK

State: RI

Zip: 02888

Name: INCORP SERVICES, INC.

**SECTION VI**

The specific purpose or purposes which it proposes to pursue in conducting its affairs in Rhode Island

are:

THE MISSION OF POSTPARTUM SUPPORT, INTERNATIONAL (PSI) IS TO PROMOTE AWARENESS, PREVENTION, AND TREATMENT OF MENTAL HEALTH ISSUE RELATED TO CHILDBEARING IN EVERY COUNTY WORLDWIDE. IT IS THE VISION OF PSI THAT EVERY WOMAN AND FAMILY WORLDWIDE WILL HAVE ACCESS TO INFORMATION SOCIAL SUPPORT, AND INFORMED PROFESSIONAL CARE TO DEAL WITH MENTAL HEALTH ISSUE RELATED TO CHILDBEARING. PSI PROMOTES THIS VISION THROUGH ADVOCACY AND COLLABORATION AND BY EDUCATING AND TRAINING THE PROFESSIONAL COMMUNITY AND THE PUBLIC.

#### SECTION VII

The names and respective addresses of its directors and officers are:

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	KATAYUNE KAENI	6706 SW 54TH AVENUE PORTLAND, OR 97219 USA
TREASURER	KAREN WACHENHEIM	6706 SW 54TH AVENUE PORTLAND, OR 97219 USA
SECRETARY	VANESSA PARK	6706 SW 54TH AVENUE PORTLAND, OR 97219 USA
CEO	WENDY DAVIS	6706 SW 54TH AVENUE PORTLAND, OR 97219 USA
CHAPTERS OFFICER	JENN DAVIS	6706 SW 54TH AVENUE PORTLAND, OR 97219 USA
VICE PRESIDENT	DAVID LEVINE	6706 SW 54TH AVENUE PORTLAND, OR 97219 USA

**Signed this 7 Day of May, 2024 at 10:22:47 AM by the officers(s).** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

KATAYUNE KAENI

Signature of President or Vice President

VANESSA PARK

Signature of Secretary or Assistant Secretary

Form No. 250  
Revised 09/07

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# Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

**Entity Name:** POSTPARTUM SUPPORT, INTERNATIONAL  
**Entity No.:** 1631821  
**Registration Date:** 01/18/1989  
**Entity Type:** Nonprofit Corporation - CA - Public Benefit  
**Formed In:** CALIFORNIA  
**Status:** Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of May 07, 2024.

**SHIRLEY N. WEBER, PH.D.**  
**Secretary of State**

**Certificate No.:** 207767631

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at [bizfileOnline.sos.ca.gov](http://bizfileOnline.sos.ca.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:

May 07, 2024 10:22 AM

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

Gregg M. Amore  
*Secretary of State*

