RI SOS Filing Number: 202459312220 Date: 9/3/2024 3:35:00 PM



State of Rhode Island Department of State - Business Services Division

RECEIVED SECRETARY OF EACH CORRESPONDENCES

Certificate of Correction

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

2024 SEP -3 PM 3: 35

Pursuant to the provisions of RIG following Certificate of Correction	L <u>7-1.2-105</u> the undersigned	corporation hereby submits the			
1. Entity ID Number:	2. The name of the corporation is:				
1776923	Y & J SERVICES INC				
3. The document to be corrected is:		4. The date the document being corrected was originally			
Articles of Incorporation		filed: 7/25/2024			
5. Specify the inaccurate record	of the corporate action or the	e defective or erroneous execution, seal or acknowledgment:			
RI DOS MADE EDITS PER FILER					
		Check the box to indicate an attachment			
6. The new corrected portion of	he document states as follow	ws:			
The new registered agent is LUSVIN ISAIAS SANTIAGO GARCIA 192 NARRAGANSSET AVE PROVIDENCE, RI 02907.					
		DI D. C.			
		RI DOS MADE EDITS PER FILER			
7. The constant to the constan	- 1. A. J.	Check the box to indicate an attachment			
7. The corrected document <i>MUST</i> be attached to this certificate.					
8. As required by RIGL <u>7-1,2-10</u> 5	the entity has paid all fees	and taxes.			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

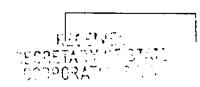
Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

SEP 03 2024

FORM 113 · Revised. 12/2023

9. Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.				
Type or Print Name of Authorized Officer of the Corporation Mauro Heridarto Silva Luna	Date 08/09/2024			
Signature of Authorized Officer of the Corporation				





Articles of Incorporation DOMESTIC Business Corporation

→ Filing Fee: \$230.00 minimum

2024 SEP -3 PM 3: 34

adopt(s) the following Articles of Incorp 1. The name of the corporation is:	oration for such corporation:		
Y & J SERVICES INC			
Check if this a close corporation p	ursuant to RIGL <u>7-1,2-1701</u> of the Gen	neral Laws, 1956, as amended.	
The total number of shares which the	ne corporation has the authority to issuized shares are deemed to have a non	le is:	
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	
100	CNP	0.00	
If you desire, you may include a stateme voting rights, and the qualifications, limit State any provisions here (optional):	ent of all or any of the designations and t ations, or restrictions of them which are	he power, preferences, and rights, including permitted by the provisions of RIGL 7-1.2.	
3. The name and address of the initial Agent Name LUSVIN ISAIS SAN		Check the box to indicate an attachment	
The name and address of the initial	TIAGO GARCIA	Check the box to indicate an attachment	
3. The name and address of the initial Agent Name LUSVIN ISAIS SAN	TIAGO GARCIA	Check the box to indicate an attachment dis:	
3. The name and address of the initial Agent Name LUSVIN ISAIS SAN Street Address (NOT a P.O. Box) 192 City/Town PROVIDENCE	NARRAGANSSET AVE State RHODE IS engaging in any lawful business, and s	Check the box to indicate an attachment dis:	

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 be	ox to indicate an attachment			
6. The name and address of each incorporator is:					
Name MAYNOR RODOLFO SANTIAGOGARCIA	Address 192 NARRAGANSSET AVE				
City/Town PROVIDENCE	State RI	Zip Code 02907			
Name LUSVIN ISAIAS SANTIAGO GARCIA	Address LUSVIN ISAIAS SANTIAGO GARCIA				
City/Town PROVIDENCE	State RI	Zip Code 02907			
Name N/A	Address N/A				
City/Town N/A	State N/A	Zip Code N/A			
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 Maynor Rodolfo Santiago	Garcia	Date / 2024			
Signature of Incorporator					
Type of Pfint Name of Incorporator LUISVIN I Saias Santiago	$\hat{\omega}$	Date 08/09/2024			
Signature of the opporator					
(vpe or Print Name of Incorporator		Date ,			
Signature of Incorporator		ł			

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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:

September 03, 2024 03:35 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

