



State of Rhode Island
Department of State - Business Services Division

REC'D RIDGS ESD
21 SEP 27 AM 9:37:29

Certificate of Correction

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-1.2-105 the undersigned corporation hereby submits the following Certificate of Correction:

1. Entity ID Number: 001776906	2. The name of the corporation is: LA ROCKA JMS REMODELING INC
3. The document to be corrected is: <i>Articles of Incorporation</i>	4. The date the document being corrected was originally filed: 07-25-2024
5. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgment: THE NAME OF THE INCORPORATOR MR. JHONNATAN FABRICIO ROMERO YUNDA <i>was</i> NOT ADDED TO THE CORPORATION. <p style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></p>	
6. The new corrected portion of the document states as follows: THE NAME OF THE INCORPORATOR MR. JHONNATAN FABRICIO ROMERO YUNDA MUST BE ADDED TO THE CORPORATION. <i>34 Violet St Providence</i> <p style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></p>	
7. The corrected document MUST be attached to this certificate.	
8. As required by RIGL <u>7-1.2-105</u> , 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

**RI DOS MADE EDITS PER FILER
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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

Date

Danilo Alex Silva Yunda

09/19/24

Signature of Authorized Officer of the Corporation





State of Rhode Island
Department of State - Business Services Division

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 STATE

Articles of Incorporation

DOMESTIC Business Corporation

→ Filing Fee: \$230.00 minimum

The undersigned, acting as incorporator(s) of the corporation under RIGL 7-1.2-202, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is:
LA ROCKA JMS REMODELING INC

Check if this a close corporation pursuant to RIGL 7-1.2-1701 of the General Laws, 1956, as amended.

2. 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.)

Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share
100	CNP	0.00

If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them which are permitted by the provisions of RIGL 7-1.2. State any provisions here (optional): Check the box to indicate an attachment

3. The name and address of the initial registered agent/office in Rhode Island is:

Agent Name **ALEX DANILO SILVA YUNDA**

Street Address (NOT a P.O. Box) **34 VIOLET ST**

City/Town PROVIDENCE	State RHODE ISLAND	Zip Code 02908
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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.

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 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED

SEP 27 2024

BY **G24XA**
J937 PJ

STAMP

5. Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these Articles of Incorporation:

Check the box to indicate an attachment

6. The name and address of each incorporator is:

Name ALEX DANILO SILVA YUNDA	Address 34 VIOLET ST	
City/Town PROVIDENCE	State RI	Zip Code 02908
Name HECTOR SAUL SILVA YUNDA	Address 34 VIOLET ST	
City/Town PROVIDENCE	State RI	Zip Code 02908
Name ANGEL CUSTODIO MOROCHOLLIGUICHU	Address 34 VIOLET ST	
City/Town PROVIDENCE	State RI	Zip Code 02908

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) _____

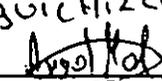
8. Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Incorporator Alex Danilo Silva Yunda	Date 09 - 27 - 2024
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Signature of Incorporator 
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Type or Print Name of Incorporator HECTOR SAUL SILVA YUNDA	Date 09 - 27 - 2024
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Signature of Incorporator 
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Type or Print Name of Incorporator Angel Custodio Morochlo Lliguichizca 	Date 09 - 27 - 2024
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Signature of Incorporator 
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5. Additional provisions, if any, not inconsistent with RIGL 7-1.2 which the incorporators elect to have set forth in these Articles of Incorporation:

Check the box to indicate an attachment

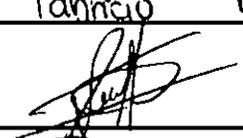
6. The name and address of each incorporator is:

Name JHONNATAN FABRICO ROMERO YUNDA	Address 34 VIOLET ST	
City/Town PROVIDENCE	State RI	Zip Code 02908
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 Jhonnatan Fabricio Romero Yunda	Date 09 - 27 - 2024
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.



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:

September 27, 2024 09:37 AM

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

Gregg M. Amore
Secretary of State

