

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

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:	1.6			_
Gonza	recorporation is: IEZ Tree Se	rvice INC			
Check if this a	close corporation pur	suant to RIGL <u>7-1,2-170</u> 1	of the General Laws,	1956, as amended.	
2. The total numbe	r of shares which the	corporation has the auth	ority to issue is:	value of \$0.01 per share.)	
Total Authorized Shares (Number of Shares)		Class of Stock		Par Value Per Share	
(2)	100.00	Chb		D:00	
	e qualifications, limital		n which are permitted by	references, and rights, including y the provisions of RIGL <u>7-1.2</u> . the box to indicate an attachment	1
3. The name and a	ddress of the initial re	egistered agent/office in F	Rhode Island is:		
Agent Name	nzalcz				
Street Address (NC	OT a P.O. Box)				
City/Town CENTRAL FA		Stat	e RHODE ISLAND	Zip Code 0 2-863	
	has the purpose of e cordance with RIGL		iness, and shall have p	perpetual existence until dissolved	-

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 0 9 2024 ોવ્ડ

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5. Additional provisions, if any, not inconsistent w	vith RIGL 7-1.2 which the incorp	porators elect to have set forth in these				
Articles of Incorporation:						
to ENGAGE in tree Service	Reserves 5					
TO FARAGE IN 1100 200 1	hasten					
		4				
a — of sald-sald-sald-sald-sald-sald-sald-sald-		Check the box to indicate an attachment				
The name and address of each incorporator is Name	Address					
	45Henry St					
Marrin Gonzalcz City/Town	State	Zip Code				
Central Falls	Ri	02863				
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 BO?	X 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 affir accompanying attachments, and that all stateme						
Type or Print Name of Incorporator		Date				
Marcin Gorals Signature of Incorporator Marcin (sortals)	10/9/24					
Signature of Incorporator						
Marvin (sorcale)						
Type or Print Name of Incorporator		Date				
[
Signature of Incorporator						
Type or Print Name of Incorporator	Date					
Signature of Incorporator						

RI SOS Filing Number: 202460539740 Date: 10/9/2024 10:56:00 AM



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:

October 09, 2024 10:56 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

