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State of Rhode Island Department of State - Business Services	s Division	TITA OCTA
Articles of Incorporation DOMESTIC Non-Profit Corporation		A SUCSALED
→ Filing Fee: \$35.00		
The undersigned, acting as incorporator(s) of a corporation u following Articles of Incorporation for such corporation:	inder RIGL <u>7-6-34</u> , adopt(s) the	TO SOLET
1. The name of the corporation is: Fante Association R.I.	· •	ED STATE DIV
2. The period of its duration is: CHECK ONE BOX ONLY		
Perpetual (on-going)	<u></u>	
Date certain for dissolution		
3. The specific purpose or purposes for which the corporation To organize Fanto natives of Rhode Island and sup To organize, promote and supp To organize charity to the	a server a set a server a set a s	ves of RI
 4. Provisions, if any, not inconsistent with the law, which the for the regulation of the internal affairs of the corporation are 	incorporators elect to set forth	box to indicate an attachment
		box to indicate an attachment 🗖
5. Name and address of the initial registered agent/office in	Rhode Island is:	
Agent Name Sylvia Serwaa Sam	······	
Street Address (<u>NOT</u> a P.O. Box) 28 Eastern Avenue	Υ	
City East Providence	State RHODE ISLAND	Zip Code 02914
MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov		ED STA? 102024 SECONTATIONAL YXF 3-1914 YXF 3-1914 A. 10: 13 AM.

6. The number of the initial Board of address of the persons who are to	f Directors of the Corporation is $\frac{4}{2}$	(not less than 3 directors) and the names and		
NAME	ADDRESS	· · · · · · · · · · · · · · · · · · ·		
Sylvia SerwaakSam	28 Eastern Avenue, Ea	28 Eastern Avenue, East Providence, R.I. 02914		
Sabina Asante	1 Tanglewood Lane, N	1 Tanglewood Lane, North Providence, R.I. 02904		
Nana Ewiafom	15 Spring Street, North	15 Spring Street, North Providence, R.I. 02904		
Richard A. Cobbinah	674 Fruit Hill Avenue,	674 Fruit Hill Avenue, North Providence, R.I. 02904		
· · · · · · · · · · · · · · · · · · ·	I	Check the box to indicate an attachment		
7. The name and address of each i	ncorporator is:			
NAME	ADDRESS			
Sylvia SerwaakSam	28 Eastern Avenue, Ea	28 Eastern Avenue, East Providence, R.I. 02914		
Sabina Asante	1 Tanglewood Lane, N	1 Tanglewood Lane, North Providence, R.I. 02904		
		Check the box to indicate an attachment		
8. Date when these Articles of Inco	rporation will be effective: CHECK C	NE BOX ONLY		
Date received (Upon filing)	st be no more than 30 days from the	date of filing)		
	the no more than so days non the			
	clare and affirm that I/we have exan nat all statements contained herein a	nined these Articles of Incorporation, including any retrue and correct.		
Type or Print Name of Incorporato		Date		
Sylvia Serwaal Sam	09/20/24			
Signature of Incorporator	· · · ·			
1 200	un-			
Type or Print Name of Incorporato	•	Date		
Sabina Asante		09/20/24		
Signature of Incorporator				
Stull				
Type or Print Name of Incorporator		Date		
Signature of Incorporator		I		

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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:

October 10, 2024 10:13 AM

Treng M. Course

Gregg M. Amore Secretary of State

