



State of Rhode Island
Department of State - Business Services Division

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21. DEPT OF BUS. SERVICES
BUS. SVCS. DIV.
2024 OCT 10 2 30 PM
4:07

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

The undersigned, acting as incorporator(s) of a corporation under RIGL 7-6-34, adopt(s) the following Articles of Incorporation for such corporation:

1. The name of the corporation is: Fante Association R.I.		
2. The period of its duration is: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
3. The specific purpose or purposes for which the corporation is organized are: To organize Fante natives of Rhode Island and support each other <i>To organize, promote and support Fante natives of R.I</i> <i>To organize charity to the needed.</i>		
		Check the box to indicate an attachment <input type="checkbox"/>
4. Provisions, if any, not inconsistent with the law, which the incorporators elect to set forth in these Articles of Incorporation for the regulation of the internal affairs of the corporation are:		
		Check the box to indicate an attachment <input type="checkbox"/>
5. Name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Sylvia Serwaa Sam		
Street Address (NOT a P.O. Box) 28 Eastern Avenue		
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

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 BY E.KXF3
 AA. 10:13 AM.

6. The number of the initial Board of Directors of the Corporation is 4 (not less than 3 directors) and the names and address of the persons who are to serve as the initial directors are:

NAME	ADDRESS
Sylvia Serwaah Sam	28 Eastern Avenue, East Providence, R.I. 02914
Sabina Asante	1 Tanglewood Lane, North Providence, R.I. 02904
Nana Ewiafom	15 Spring Street, North Providence, R.I. 02904
Richard A. Cobbinah	674 Fruit Hill Avenue, North Providence, R.I. 02904

Check the box to indicate an attachment

7. The name and address of each incorporator is:

NAME	ADDRESS
Sylvia Serwaah Sam	28 Eastern Avenue, East Providence, R.I. 02914
Sabina Asante	1 Tanglewood Lane, North Providence, R.I. 02904

Check the box to indicate an attachment

8. 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 30 days from the date of filing) _____

9. 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 Sylvia Serwaah Sam	Date 09/20/24
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Signature of Incorporator


Type or Print Name of Incorporator Sabina Asante	Date 09/20/24
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Signature of Incorporator


Type or Print Name of Incorporator	Date
------------------------------------	------

Signature of Incorporator

X