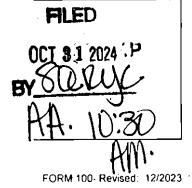
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State of Rhode Island Department of State - Business Service	s Division	1001 0C1 1100 SV	
Articles of Incorporation DOMESTIC Business Corporation		-STAIRE	
→ Filing Fee: \$230.00 minimum		0; 3C	
The undersigned, acting as incorporator(s) of the corporation adopt(s) the following Articles of Incorporation for such corporation			
1. The name of the corporation is: KyCOSP INC			
Check if this a close corporation pursuant to RIGL 7-1.2	-1701 of the General Laws, 1	1956, as amended.	
<ol> <li>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.)</li> </ol>			
Total Authorized Shares Class of (Number of Shares)	Stock	Par Value Per Share	
<u>275,000</u> <u>Com</u> n	non No Par		
If you desire, you may include a statement of all or any of the or voting rights, and the qualifications, limitations, or restrictions of State any provisions here ( <i>optional</i> ):	of them which are permitted by		
3. The name and address of the initial registered agent/office in Rhode Island is:			
Agent Name Kyle Christopher Olses	1		
Street Address (NOT a P.O. Box) 258 Quaker In			
City/Town Scilucte	State RHODE ISLAND	Zip Code のしからう	
4. The corporation has the purpose of engaging in any lawf or terminated in accordance with RIGL <u>7-1,2</u> .	ul business, and shall have p	erpetual 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



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 h	ex to indicate an attachment	
6. The name and address of each incorporator is:			
Name //	Address		
City/Town	258 Qual	Le In Zip Code	
Scituste	RI	02057	
Name JohnWOlsen III	Address 1 Debbie		
City/Town Berleley	State	Zip Code	
Name	Address		
City/Town	State	Zip Code	
7. Date when these Articles of Incorporation will be effective: CHECK ONE BOX ONLY			
Definition of the second			
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		Date	
Signature of Incorporator			
Type or Print Name of Incorporator		Date	
JOHN WOISEN III		10/21/24	
Signature of Incorporator			
Type or Print Mame of Incorporator		Date	
Signature of Incorporator			

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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 31, 2024 10:30 AM

Treng M. Course

Gregg M. Amore Secretary of State

