



State of Rhode Island
Department of State - Business Services Division

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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:

northeastern narragansett native nation

2. The period of its duration is: **CHECK ONE BOX ONLY**

☒ Perpetual (on-going)

☐ Date certain for dissolution _____

3. The specific purpose or purposes for which the corporation is organized are: we're a group of native American Tribal Descendants our purpose is to,
1) preserve our native culture and traditions while making sure we uplift and support our local underserved community.
2) we provide direct aid to underserved and the homeless
3) our goal is to obtain a truck to provide ride for seniors and vets to and from appointments Check the box to indicate an attachment ☐

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 ☐

5. Name and address of the initial registered agent/office in Rhode Island is:

Agent Name

Tiffany Washington

Street Address (NOT a P.O. Box)

252 Division st Apt 6

City

Providence

State

RHODE ISLAND

Zip Code

02860

FILED

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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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
Joseph Joseph Caffy Jr	93 Evergreen Street Providence 02906
Dwayne Washington	252 Division Street Pawtucket RI 02860
Carmen Davis-Russ	1306 Simon Drive Chesapeake Va 23320
James Singleton JR	50 Mountain Ave New London CT
Check the box to indicate an attachment <input type="checkbox"/>	

7. The name and address of each incorporator is:

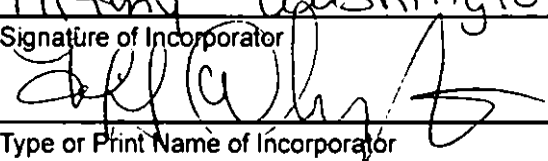
NAME	ADDRESS
Tiffany Washington	252 Division Street Pawtucket RI 02860
Check the box to indicate an attachment <input type="checkbox"/>	

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	Date
Tiffany Washington	3/26/25
Signature of Incorporator	
	
Type or Print Name of Incorporator	Date
Signature of Incorporator	
Type or Print Name of Incorporator	Date
Signature of Incorporator	



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:

March 26, 2025 03:54 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Gregg M. Amore
Secretary of State

