

State of Rhode Island Department of State - Business Services Division

REC'D RIDOSASSD

Articles of Incorporation

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$35.00

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

1. The name of the corporation is:	 -		
_			
Gerenity Stars			
2. The period of its duration is: CHECK ONE BOX ONLY			
Perpetual (on-going)			
Date certain for dissolution	<u></u>	_ _	
3. The specific purpose or purposes for which the corporation	n is organized are:		
To praise non-medical in-home Co	ire gervices to se	eniors and Individual	
Laid lieabilities, To deliver Der Son	adizek noa- med	(CA) HOWE COLL	
Convices that enable clients to m	airtain their bigh	ity and remain	
active members in the Community.			
MC de (me)			
	Check the	box to indicate an attachment	
4. Provisions, if any, not inconsistent with the law, which the		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			
Matilda Folgen Adegen	· (
Street Address (NOT a P.O. Box)			
81 hall St			
City	State	Zip Code	
Prodictions	RHODE ISLAND	O4904	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 9:15 A

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C. The purchase of the initial December of Direct	are of the Comparation in 7 /net long them 2 die	antarn) and the names and
The number of the initial Board of Direct address of the persons who are to serve a		ectors) and the names and
NAME	ADDRESS	
Matilda Faarin Adagami	81 hall St Providence RT	
Modinat Lawal	244 conternan Ave Apt 623, North	provisionce RI
Manely Varela	415 hurt st central falls, R7	
ľ	,	
	Check the box to	indicate an attachment [
7. The name and address of each incorpor	ator is:	
NAME	ADDRESS	
Maticka Fotorin Adegomi	81 hall st pravisence RI	
	Check the box to	indicate an attachment
8. Date when these Articles of Incorporation	n 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)	
	nd affirm that I/we have examined these Articles of Ind atements contained herein are true and correct.	corporation, including any
Type or Print Name of Incorporator		Date
Matilda Folgein A	teremi	July/18/2005
Signature of Incorporator		
tootoba		
Type or Print Name of Incorporator		Date
Signature of Incorporator		
Type or Print Name of Incorporator		Date
Signature of Incorporator		