RI SOS Filing Number: 202577172180 Date: 7/25/2025 1:13:00 PM



State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Non-Profit Corporation Application for Certificate of Authority

(Section 7-6-74 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

- 1. The name of the corporation is TSM 14 Enterprise Corp.
- 1(a). The name, if different, which it elects to use in Rhode Island is:

Note: If 1(a) is completed, a "Fictitious Business Name Statement" is required to be filed with this application

SECTION II

It is incorporated under the laws of State: NC Country: USA

SECTION III

The date of its incorporation is 4/22/2022

and the period of its duration is X Perpetual __ Date certain for dissolution

SECTION IV

The address of its principal place of business is:

No. and Street: 624 TYVOLA RD STE 103-190

City or Town: <u>CHARLOTTE</u> State: <u>NC</u> Zip: <u>28217-3578</u> Country: <u>USA</u>

SECTION V

The address of its proposed registered office in Rhode Island is:

No. and Street: 500 CONGDON DRIVE

City or Town: WAKEFIELD State: RI Zip: 02879-2756

Name: <u>MARGUERITE SCHOLAR</u>

SECTION VI

The specific purpose or purposes which it proposes to pursue in conducting its affairs in Rhode Island are:

TO OPERATE EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES BY IMPLEMENTING

PROGRAMS THAT INCREASE OPPORTUNITIES FOR YOUTH AND STUDENTS ACROSS RHODE ISLAND

THROUGH ACCESS TO ACADEMIC ENRICHMENT, ATHLETIC DEVELOPMENT, LEADERSHIP TRAINING,

AND MENTORSHIP.

IN ALIGNMENT WITH ITS MISSION, THE TERANCE MANN COMPLETE PLAYER FOUNDATION (TMCPF)

AND TSM 14 ENTERPRISE CORP WILL PROVIDE INITIATIVES THAT SUPPORT THE HOLISTIC GROWTH

OF YOUNG PEOPLE—DEVELOPING "COMPLETE PLAYERS" WHO EXCEL BOTH IN THE CLASSROOM AND IN

ATHLETIC PURSUITS. THESE EFFORTS INCLUDE BUT ARE NOT LIMITED TO: YOUTH SPORTS

<u>CLINICS, ACADEMIC WORKSHOPS, COLLEGE READINESS PROGRAMS, SCHOLARSHIP ASSISTANCE, AND</u>

COMMUNITY OUTREACH EVENTS, ALL AIMED AT EMPOWERING YOUTH TO REACH THEIR FULL

POTENTIAL AND BECOME PRODUCTIVE CITIZENS OF THEIR COMMUNITIES.

SECTION VII

The names and respective addresses of its directors and officers are:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ASTRID DAYNIA BENTON	2046 CROGHAN DR CARNEGIE, PA US CARNEGIE, PA 15106-1593 USA
TREASURER	ORLANDO XAVIER HIXON	2711 YANCEY LANE GLENARDEN, MD 20706 USA
VICE PRESIDENT	WENDI T. BARRICELLI	184 WOONASQUATUCKET AVE UNIT 134 NORTH PROVIDENCE, RI 02911-3156 USA

Signed this 25 Day of July, 2025 at 1:18:04 PM by the officers(s). This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

ASTRID DAYNIA BENTON

Signature of President or Vice President

ORI ANDO YAVIER HIYON

Signature of Secretary or Assistant Secretary Form No. 250 Revised 09/07 © 2007 - 2025 State of Rhode Island All Rights Reserved



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

TSM 14 ENTERPRISE CORP.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 22nd day of April, 2022, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

Certification# 124509677-1 Reference# 23188460- Page: 1 of 1 Verify this certificate online at https://www.sosnc.gov/verification IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 20th day of July, 2025.

Secretary of State

6 laine I Marshall

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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:

July 25, 2025 01:13 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

