



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
25 SEP 10 AM 11:35:50

Articles of Amendment

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-6-40, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation:

1. Entity ID Number: 001657597	2. The name of the corporation is: Pawtucket Backpackers
3. If the entity's name is changing, state the new name: <div style="text-align: right;">Check the box to indicate no change <input checked="" type="checkbox"/></div>	
4. If the period of its duration is changing complete the following section: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____ <div style="text-align: right;">Check the box to indicate no change <input checked="" type="checkbox"/></div>	
5. If the entity's purpose is changing complete the following section: <i>"The new purpose should include ALL activity to be transacted in the State of Rhode Island."</i> <p>The Pawtucket Backpackers provide supplemental nutrition to Pawtucket students facing food insecurity on weekends and during school time vacations and holidays.</p> <p>There are no paid employees for the Pawtucket Backpackers. The Pawtucket Backpackers is a 100% volunteer 501(c)3 nonprofit.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>Check the box to indicate an attachment <input type="checkbox"/></div> <div>Check the box to indicate no change <input checked="" type="checkbox"/></div> </div>	
6. If the number of directors is increasing or decreasing (not less than 3 directors), state the number of directors in this section: 6 <i>*List ALL directors as of this amendment</i>	
NAME	ADDRESS
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>Check the box to indicate an attachment <input checked="" type="checkbox"/></div> <div>Check the box to indicate no change <input type="checkbox"/></div> </div>	

RI DOS MADE NON-SUBSTANTIVE EDITS

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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(CBN)

BY 4K BX5

7. If adding or amending additional provisions, complete the following section:

Check the box to indicate an attachment ☐

Check the box to indicate no change ☒

8. The amendment was adopted in the following manner: **CHECK ONE BOX ONLY**

- ☒ The amendment was adopted at a meeting of the members held on June 26, 2025, at which meeting a quorum was present, and the amendment received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.
- ☐ The amendment was adopted by a consent in writing on _____, signed by all members entitled to vote with respect thereto.
- ☐ The amendment was adopted at a meeting of the Board of Directors held on _____, and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

9. Date when these Articles of Amendment 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) _____

10. Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print the Name of the Non-Profit Corporation

Pawtucket Backpackers

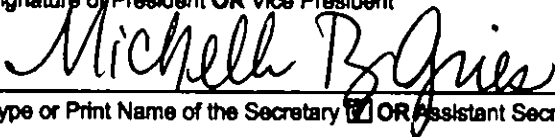
Type or Print Name of the President ☒ OR Vice President ☐

Michelle Danzer-Gries

Date

07/09/2025

Signature of President OR Vice President



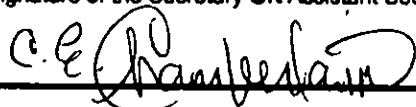
Type or Print Name of the Secretary ☒ OR Assistant Secretary ☐

Candy Chamberlain

Date

7/18/25

Signature of the Secretary OR Assistant Secretary



TWO SIGNATURES ARE REQUIRED

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.

#001657597 / Pawtucket Backpackers

Form 201: Articles of Amendment

Attachment for Item 6: If the number of directors is increasing or decreasing (not less than 3 directors), state the number of directors in this section: **6**

List all directors as of this attachment:

Name	Address
Michelle Danzer-Gries	122 Chelsea Dr., Seekonk, MA 02771
Lisa Fasoldt	84 Buena Vista Dr., Attleboro, MA 02703
Carolyn Beaudry	45 Thatcher St., Rumford, RI 02916
Candy Chamberlain	223 Central Ave., Seekonk, MA 02771-4138
Joanne Bonollo	407 Grand Ave., Pawtucket, RI 02861
Emilia (Emily) Woodard	20 Barnard St., Pawtucket, Ri 02861

RI DOS MADE EDITS PER FILER



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:

September 10, 2025 11:35 AM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

