



State of Rhode Island
Department of State - Business Services Division

Certificate of Authority

FOREIGN Non-Profit Corporation

→ Filing Fee: \$50.00

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Pursuant to the provisions of RIGL 7-6-74, the undersigned foreign non-profit corporation hereby applies for a Certificate of Authority to conduct affairs in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:		
Far Corners Community Musical Theatre		
1a. The name, if different, which it elects to use in Rhode Island is:		
*If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application		
2. It is incorporated under the laws of:		
Hawaii		
3. The date of its incorporation is		
7/8/2008		
And the period of its duration is CHECK ONLY ONE BOX		
☒ Perpetual (on-going)		
☐ Date certain for dissolution _____		
4. The address of its principal place of business is:		
1212 Nuuanu Avenue, Apartment 511, Honolulu, HI 96817		
5. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Juliet Lamb		
Street Address (NOT a P.O. Box) 1074 Main St.		
City/Town	State	Zip Code
Hope Valley	RHODE ISLAND	02832

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 purpose or purposes which it proposes to pursue in the conducting its affairs in Rhode Island:

To send and receive mail, manage fundraising campaigns (<\$10,000), and communicate with participants in musical theater programs

Check the box to indicate an attachment ☐

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

OFFICE	NAME	ADDRESS
Director	Cosette Ruesga	2620 Ellendale Place #307 Los Angeles, CA 90007, USA
Director	Isaac Matamoros Trejos	150m Southeast of Hotel Monteverde Lodge, Monteverde, Puntarenas, Costa Rica
Director		
President	Jennie Mollica	200m north of Stella's Bakery, Monteverde, Puntarenas, Costa Rica
Vice President		
Treasurer	Dario Villalobos	21 Hindhede Drive, Le Wood #05-02, Singapore 589318
Secretary	Jose Pablo Arias	50m North of Laboratorio CCSS, Los Angeles, Cartago, Costa Rica

Check the box to indicate an attachment ☐

8. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

Under penalty of perjury, we declare and affirm that we have examined this Application for Certificate of Authority, including and accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of ☒ President OR ☐ Vice President

Jennie Mollica

Date

October 9, 2025

Signature of President OR Vice President

Jennie Mollica

Type or Print Name of ☐ Secretary OR ☒ Assistant Secretary

Dario Villalobos

Date

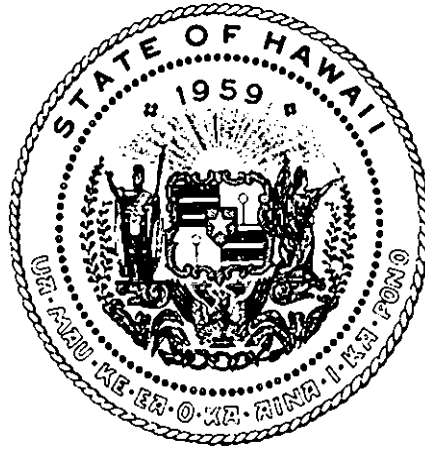
October 9, 2025

Signature of Secretary OR Assistant Secretary

Dario Villalobos

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.



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs
of the State of Hawaii, do hereby certify that

FAR CORNERS COMMUNITY MUSICAL THEATRE

was incorporated under the laws of Hawaii on 07/08/2008 ;
that it is an existing nonprofit corporation; and that,
as far as the records of this Department reveal, has complied
with all of the provisions of the Hawaii Nonprofit Corporations
Act, regulating domestic nonprofit corporations.

IN WITNESS WHEREOF, I have hereunto set
my hand and affixed the seal of the
Department of Commerce and Consumer
Affairs, at Honolulu, Hawaii.

Dated: October 08, 2025

Director of Commerce and Consumer Affairs

