

## State of Rhode Island and Providence Plantations Department of State - Business Services Division

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

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

NOT OFFICE OF STATE O

## Articles of Incorporation Business Corporation

Filing Fee: \$230.00 minimum

The undersigned acting as incorporator(s) of the corporation under <u>RIGL 7-1.2</u>, adopt(s) the following Articles of Incorporation for such corporation:

The name of the corporation is:				
LOYOLBroz =	INC			
Is this a close corporation pursuant	to RIGL 7-1.2-1701 of the Genera	al Laws, 1956, as amended? (Yes) No		
2. The total number of shares which the corporation has the authority to issue is: (RIGL 7-1.2-605)  (Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.)				
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share		
500,000	A	1.00		
If you desire, you may include a statement voting rights, and the qualifications, limitati State any provisions here (optional):	of all or any of the designations an ons, or restrictions of them which a	nd the power, preferences, and rights, including are permitted by the provisions of <u>RIGL 7-1.2</u> .  Check this box to indicate an attachment.		
3. The name and address of the initial re	gistered agent/office of the corpo	ration is:		
Agent Name  Moise  Moise				
Sfreet Address (NOT a P.O. Box)				
City/Town Providence	State RHODE ISLAND	102104		
4. The corporation has the purpose of er dissolved or terminated in accordance w	ngaging in any lawful business, ar ith <u>RIGL 7-1,2</u> .	nd shall have perpetual existence until		

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Form No. 100 Revised: 2015

5. Additional provisions, if any, not inconsistent with <u>RIGL 7-1.2</u> which the incorporators elect to have set forth in these Articles of Incorporation:					
		Che	ck this box to indicate an attachment.		
6. The name and address of each incorporator is: (RIGL 7-1.2-201)					
Name ANDRE MIC	ise	Address	veil St		
OD Jence	State C	I	Zip Code 2904		
<b>N</b> ame		Address			
City/Town	State		Zip Code		
Name	<u> </u>	Address			
City/Town	State		Zip Code		
7. Date when these Articles of Incorporation will be effective; CHECK ONLY ONE BOX					
Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the day of filing) $\frac{1}{2000}$					
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.					
Signature of Incorporator	89		Date		
HADRE MOI	50		12/18/15		
Signature of Incorporator			Date		
Signature of Incorporator			Date		

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.

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

