State of Rhode Island Department of State - Business Services Division State Department of State - Business Services Division Articles of Incorporation DOMESTIC Business Corporation Department of State - Business Services Division The undersigned, acting as incorporator(s) of the corporation under RIGL 7.12.202, adopt(s) the following Articles of Incorporation for such corporation: Department of State - Business Corporation The undersigned, acting as incorporator(s) of the corporation under RIGL 7.12.202, adopt(s) the following Articles of Incorporation for such corporation: Department of State - Business Corporation The name of the corporation is: Articles of Incorporation is: Articles of thrwise stated, all authorized shares are deemated to have a nominal or per value of \$0.01 per share.) Total Authorized Shares Class of Stock IDD C.N.P Or Or If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including State any provisions here (optional): 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Street Address INOT a PO, Box BD + Mark CKet + State RHODE ISLAND Zip Code D286 / 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name BD + Mark CKet + State RHODE ISLAND Zip Code D286 / Area Corporation has the purpose of engaging in any lawful business, and shall have perpetual existence until di	R R	a SOS Filing Number:	202448809300	Date: 3/18/2024 2:0	JU:UU PM
The undersigned, acting as incorporator(s) of the corporation under RIGL 7-1.2-202. adopt(s) the following Articles of Incorporation for such corporation: 1. The name of the corporation is: AFriCaN AMERICA NewEngleMatchurch Attian (e) In C Check if this a close corporation pursuant to RIGL 7-1.2-1701 of the General Laws, 1956, as amended. Check if this a close corporation pursuant to RIGL 7-1.2-1701 of the General Laws, 1956, as amended. The total number of shares which the corporation has the authority to issue is: (Unless otherwise stated, all authorized shares are deemed to have a nominal or par value of \$0.01 per share.) Total Authorized Shares Class of Stock Par Value Per Share IDD C.N.P Or Or If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, imitations, or restrictions of them which are permitted by the provisions of RIGL 7-12. State any provisions here (optional): Check the box to indicate an attachment 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Agent Name Ary America Agent Name Ary America Agent Name Ary America Agent Name Ary America Agent Name	S		Business Servic	es Division	XHR RCD
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AFF i Can Ametican NewEnglamd Church Attiance inc Check if this a close corporation pursuant to RIGL 7-1.2-1701 of the General Laws, 1956, as amended. The total number of shares which the corporation has the authority to issue is: (Unless otherwise stated, all authorized shares are deemed to have a nominal or per value of \$0.01 per share.) Total Authorized Shares Class of Stock Par Value Per Share IDD C.N.P 0:0000 If you desire, you may include a statement of all or any of the designations and the power, preferences, and rights, including voting rights, and the qualifications, limitations, or restrictions of them which are permitted by the provisions of RIGL 2-12. State any provisions here (optional): Check the box to indicate an attachment Check the box to indicate an attachment Check the design attaches (NOT a PO, Box) 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Check St. APC Science State and provisions here (optional): State RHODE Island Zip Code 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Check St. APC Science Zip Code 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Check St. APC Science Zip Code 3. The name and address of the initial registered agent/office in Rhode Island is: Agent Name Check St. APC Science Zip C		Tono wing Anticles of Incorp	or(s) of the corporation oration for such corp	n under RIGL <u>7-1,2-202,</u> oration:	
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Agent Name GAry DANTAGER Street Address (NOT a P.O. Box) 327 Prospect St. AP4. 5 City/Town Pawh/CKet The corporation has the purpose of engaging in any lowful business of the purpose of engaging in any lowful business.	State any pro	ovisions here (optional):	_	Che	b by the provisions of RIGL 7-1.2.
Agent Name GIARY DANIZLER Street Address (NOT a P.O. Box) 327 Prospect St. AP4. 5 City/Town Pawh/CKet 4. The corporation has the purpose of engaging in any lowful business on the number of engaging in any lowful business	3. The name	and address of the initial re	egistered agent/office	in Rhode Island is:	
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Pawh/CKe+ Zip Code RHODE ISLAND Zip Code 02861	327	\bigcirc \uparrow \uparrow \downarrow \downarrow	St. APt.	5	
4. The corporation has the purpose of engaging in any lawful hubiness and the purpose of engaging in any lawful hubiness	Pai	whicket			Zip Code
	4. The corporation of terminated	ation has the purpose of en	ngaging in any lawful		perpetual existence until dissolved

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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*						
5. Additional provisions, if any, not inconsistent with RIGL <u>7</u> Articles of Incorporation:	-1.2 which the incorporators ele	ect to have set forth in these				
	Check the t	pox to indicate an attachment				
6. The name and address of each incorporator is:						
Name GIARY DANTACH	Address 327 Pros					
City/Town Pautucket	State R-13	Zip Code				
Name	Address					
City/Town	State	Zip Code				
Name	Address	.				
City/Town	State	Zip Code				
7. Date when these Articles of Incorporation will be effective	e: CHECK ONE BOX ONLY					
Date received (Upon filing)						
Later effective date (Date must be no more than 90 days from the date of filing)						
8. Under penalty of perjury, I/we declare and affirm that I/we accompanying attachments, and that all statements contain						
Type or Print Name of Incorporator		Date				
AtriCaN AMERICAN-NEWEMSlan	H CHUrch Alliance	3 18 24				
AFRICAN AMERICAN-NEWEMJAN Signature of Incorporator Many Dantslek						
Type or Print Name of Incorporator		Date				
Signature of Incorporator		1				
Type or Print Name of Incorporator		Date				
		· · · · · · · · · · · · · · · · · · ·				
Signature of Incorporator						

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.

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:

March 18, 2024 02:00 PM

Treng M. Course

Gregg M. Amore Secretary of State

