State of New Hampshire

Recording fee: \$25.00 Form NP-1 Use black print or type. RSA 292:2

ARTICLES OF AGREEMENT OF A NEW HAMPSHIRE NONPROFIT CORPORATION

| Business Email: | | (/ | (|
|---|-------------------------|------------------|-----------|
| Principal Mailing Address (if different):(no. & street) | (city/town) | (state) | (zip code |
| (no. & street) | (city/town) | (state) | (zip code |
| FIFTH : The New Hampshire principal address at which the on is | business of this corpo | oration is to be | carried |
| Table of Sildionoide | 22 | 2.53.2.3 4500 | |
| FOURTH: The provisions for disposition of the corporate as corporation including the prioritization of rights of shareholde | | | |
| THIRD: The provisions for establishing membership and pa | rticipation in the corp | oration are: | |
| SECOND: The object/purpose for which this corporation is e | established is: | | |
| FIRST: The name of the corporation shall be | | | |
| Revised Statutes Annotated, Chapter 292 by the following at | TICIES: | | |
| THE UNDERSIGNED, being persons of lawful age, associated the following persons of lawful age, as a following person age and the following person age age and the following person age age and the following person age | | ns of the New I | Hampshire |
| | | | |

Please check if you would prefer to receive the courtesy Nonprofit Report Reminder by email.

SIXTH: The amount of capital stock, if any, or the number of shares or membership certificates, if any, and provisions for retirement, reacquisition and redemption of those shares or certificates are:

| CC | SEVENTH: Provision eliminating or limiting the personal liability of a director, an officer or both, to the corporation or its shareholders for monetary damages for breach of fiduciary duty as a director, an officer or both is (Note 1) | | | | | | |
|----|--|-------------------------------------|----------------------|--------|--|--|--|
| E | IGHTH: Signatures and post office add | ress of each of the persons associa | ating together to fo | rm the | | | |
| | orporation: (Note 2) | · | | | | | |
| | Signature and Name | Post Office Addre | <u>ss</u> | | | | |
| 1. | Signature | Street | | | | | |
| | Name (please print) | City/Town | State | Zip | | | |
| 2. | Signature | Street | | | | | |
| | Name (please print) | City/Town | State | Zip | | | |
| 3. | Signature | Street | | | | | |
| | Name (please print) | City/Town | State | Zip | | | |
| 4. | Signature | Street | | | | | |
| | Name (please print) | City/Town | State | Zip | | | |
| 5. | Signature | Street | | | | | |
| | Name (please print) | City/Town | State | Zip | | | |

Notes: 1. If no provision eliminating or limiting personal liability, insert "NONE".

2. At least five signatures are required.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989 Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH