

Filing Fee: \$50.00

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

NON-PROFIT PRODUCERS' COOPERATIVE ASSOCIATION

ARTICLES OF ASSOCIATION
(To Be Filed In Duplicate Original)

The undersigned, acting as incorporators, desire to become incorporated under the provisions of Chapter 7-7 of the General Laws, 1956, as amended, and adopt the following Articles of Association for such association:

1. The name of the association is _____

(The name must contain the word "Cooperative.")

2. The objects or purposes for which it is formed:

4. The term for which it is to exist (if perpetual, so state) _____

5. The aggregate number of shares of capital stock, if any, which the corporation shall have the authority to issue
(If none, so state):

(a) *If only one class:* Total number of shares _____ (If the authorized shares are to consist of one class only. state the par value of such shares or a statement that all of such shares are to be without par value.)

or

(b) *If more than one class:* Total number of shares _____ (If the authorized shares are to consist of more than one class. provide a description of the different classes and a statement of the terms on which they are created.) _____

(c) The restrictions, if any, imposed upon the transfer of stock:

6. Provisions, if any, consistent with law, for the regulation of the internal affairs of the association pursuant to §7-7-3(6) of the General Laws, 1956, as amended:

7. The name and address of each incorporator is:

Name

Address

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Date: _____

Signature of each Incorporator

STATE OF _____
COUNTY OF _____

In _____, on this _____ day of _____, _____, personally appeared before me _____

each and all known to me and known by me to be the parties executing the foregoing instrument, and they severally acknowledged said instrument by them subscribed to be their free act and deed.

Notary Public
My Commision Expires: _____