DOMESTIC NONPROFIT CORPORATION

STATE OF MAINE

RESTATED ARTICLES OF INCORPORATION

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

(Name of Corporation as it appears on the records of the Secretary of State)

Pursuant to 13-B MRSA §805, the undersigned corporation adopts these Articles of Restatement:

FIRST: All restated statements required to be set forth in Articles of Incorporation (*<u>MNPCA-6-1</u>) are attached as Exhibit _______. Statements as to the incorporator or incorporators and the initial directors may be omitted. This restatement was adopted on ______.

(date)

("X" one box only)

- By the members at a meeting at which a quorum was present and the restatement received at least a majority of the votes which members were entitled to cast.
- (If the Articles require more than a majority vote.) By the members at a meeting at which the restatement received at least the percentage of votes required by the Articles of Incorporation.
- By the written consent of all members entitled to vote with respect thereto.
- [] (If no members, or none entitled to vote thereon.) By majority vote of the board of directors.

SECOND:	The Registered Agent is a:	(select either a Commercial or Noncommercial	Registered Agent)

Commercial Registered Agent	CRA Public Number:
(name of cor	nmercial registered agent)
Noncommercial Registered Agent	
(name of non	commercial registered agent)
(physical location, not P	.O. Box – street, city, state and zip code)

(mailing address if different from above)

THIRD: Pursuant to 5 MRSA §108.3, the new commercial registered agent as listed above has consented to serve as the registered agent for this nonprofit corporation.

Dated	**By	(signature)
MUST BE COMPLETED FOR VOTE OF MEMBERS I certify that I have custody of the minutes showing	**By	(signature) type or print name and capacity) (signature)
the above action by the members.		type or print name and capacity)

*Form MNPCA-6-1 MUST accompany this filing.

**This document MUST be signed by any duly authorized officer. (13-B MRSA §104.1.B)

Please remit your payment made payable to the Maine Secretary of State.

Submit completed form to:	Secretary of State		
	Division of Corporations, UCC and Commissions		
	101 State House Station		
	Augusta, ME 04333-0101		
	Telephone Inquiries: (207) 624-7752	Email Inquiries: CEC.Corporations@Maine.gov	

Customer Contact Cover Letter

Name of entity(s) on the submitted filings:				
Optional special handling request(s): (check o	only if applicable)			
Hold attested copy for pick up (will	be required to pick up at our office in Augusta, Maine)			
□ 24-hour expedited filing (next busin	ness day) service: \$50 additional filing fee per entity			
Immediate expedited filing (same by	usiness day): \$100 additional filing fee per entity			
NOTE: Only one expedite fee is required if filin	g multiple documents for the <u>same entity/charter number</u> at the same tin			
Payment can be made by check or money ord obtain a credit card voucher at https://www.main	ler (payable to Maine Secretary of State) or by credit card. You may ne.gov/sos/cec/forms/credit.pdf.			
Total fee(s	s) enclosed: \$			
(Name of contact person)	(Daytime telephone number)			
(Contact email address for <u>this</u> filing)	(Email address to use for annual report reminders)			
Name and address of person to return the attes	sted copy of the completed filing:			
(Na	ame of attested copy recipient)			
	(Firm or Company)			
	(Mailing Address)			

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or cec.corporations@maine.gov

Submit filings to: Mailing Address if using US Postal Service Department of the Secretary of State Corporations, UCC and Commissions 101 State House Station Augusta, ME 04333-0101

Mailing Address if using FedEx/UPS Department of the Secretary of State Corporations, UCC and Commissions 6 E. Chestnut Street, 5th Floor Augusta, ME 04330