

DIVISION OF CORPORATIONS

One Commerce Plaza 99 Washington Ave. Albany, NY 12231-0001 www.dos.ny.gov

Credit Card/Debit Card Authorization

Attach this form to your document, certificate or other written request.

The Name of the Corporation or Business Entity to Which This Request Applies is:

Project X O	pen Source, Inc.	
Check Box for Requested Service:		Fill in Fee or Amount:
FILING OF DOCUMENT OR CERTIFICATE (Consult appropri	oriate fee schedule for fee)	\$
Check the appropriate box: Routine Processing: No additional fee Expedited Processing: 24-Hour Additional \$25 fee Same Day	Additional \$75 fee 2-Hour Additional \$150 fee	\$
CERTIFIED COPY (The fee for each certified copy is \$10)		\$
Check the appropriate box: Routine Processing: No additional fee		
	/ Additional \$75 fee 2-Hour Additional \$150 fee	
PLAIN COPY (<i>The fee for <u>each</u> plain copy is \$5</i>) Check the appropriate box: Routine Processing: No additional fee	<u></u>	\$
Expedited Processing: 24-Hour Additional \$25 fee Same Day	Additional \$75 fee 2-Hour Additional \$150 fee	\$
CERTIFICATE OF STATUS (Certificates of Good Standing, et Check the appropriate box: Routine Processing: No additional fee	etc. The fee for <u>each</u> certificate is \$25.)	\$
	dditional \$75 fee 2-Hour Additional \$150 fee	\$
SERVICE OF PROCESS (Must be served in person at the abo	ove address)	\$
BIENNIAL / FIVE YEAR STATEMENT		\$
OTHER		\$
DEPOSIT TO DRAWDOWN:		
Account Name: Account Num	nber:	\$
	TOTAL (Total Amount Due)	\$75.00
Same Day expedited service requests must be receive	d by 12 noon on regular business da	ivs.
2-hour expedited service requests must be received by		
Expedited processing fees are charged even if a document, certificate or	· 	
Credit/Debit Card Information: MasterCard	X Visa American E	xpress
	PRINT CLEARLY	лр. 000
Card Number: 4400661407191474	Expiration Date (Month/	Year): 03/2019
Name as it Appears on Card: Maria Laura Ventoso		
Cardholder's Billing Address: 140 West 69 Street APT 7	'2A	
City: New York City	State: New York Zip Code:	10023
Fax Number: 1 646 762 9486		
Cardholder's Signature:	Date	12/10/2018
If the name on the card is in the name of a corporation or other business entity, please print the signer's name:		



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DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE

One Commerce Plaza 99 Washington Ave. Albany, NY 12231-0001 www.dos.ny.gov

CERTIFICATE OF INCORPORATION OF

Project X Open Source, Inc.

(Corporation Name)
Under Section 402 of the Not-for-Profit Corporation Law
FIRST: The name of the corporation is:
Project X Open Source, Inc.
SECOND: The corporation is a corporation as defined in subparagraph (5) of paragraph (a) of Section 102 of the Not-for-Profit Corporation Law.
THIRD: (Select all that apply)
The purpose(s) for which the corporation is formed is:
any purpose for which corporations may be organized under the Not-for-Profit Corporation Law as a charitable corporation.
any purpose for which corporations may be organized under the Not-for-Profit Corporation Law as a non-charitable corporation.
any purpose for which corporations may be organized under the Not-for-Profit Corporation Law as a charitable corporation or as a non-charitable corporation. (<i>Note: Checking this box results in the corporation being categorized as a charitable corporation in paragraph FIFTH.</i>)
the following specific purpose(s):

FOURTH: (Check the appropriate statement)
The corporation is not formed to engage in any activity or for any purpose requiring consent or approval of any state official, department, board, agency or other body. No consent or approval is required.
The corporation is formed to engage in an activity or for a purpose requiring consent or approval of a state official, department, board, agency or other body. Such consent or approval is attached.
FIFTH: The corporation is a: charitable corporation non-charitable corporation under Section 201 of the Not-for-Profit Corporation Law.
SIXTH: The office of the corporation is to be located in the County of New York
State of New York.
SEVENTH: The names and addresses of the initial directors of the corporation are: (A minimum of three is required)
Name: Laura Ventoso
Address: 140 West 69th Street Apt 72A, New York City, New York 10023
Name: Ana Vasquez
Address: 38 West 73rd Street Unit 3A, New York, New York 10023
Address: 38 West 73rd Street Unit 3A, New York, New York 10023 Name: Reidocho Arms
D. Calendara A
Name: Reidocho Arms

NINTH: (Optional – Corporations seeking tax exempt status may include language required by the Internal Revenue Service in this paragraph.)

The following language relates to the corporation's tax exempt status and is not a statement of purposes and powers. Consequently, this language does not expand or alter the corporation's purposes or powers set forth in paragraph THIRD.

Incorporator Name: Laura Ventoso

(Type or Print)

Address: 140 West 69 Street Apt 72A, New York City, New York 10023

Signature \mathbf{X}

CERTIFICATE OF INCORPORATION OF

Project X	Open	Source,	Inc.
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(Corporation Name)

Under Section 402 of the Not-for-Profit Corporation Law

Filer's Name: LAURA VENTOSO

Mailing Address: 140 WEST 69 STREET APT 72A

City: NEW YORK CITY State: NEW YORK Zip Code: 10023

NOTES:

- 1. §301 of the Not-for-Profit Corporation Law requires that the name contain "Incorporated" or "Inc." or one of the other words or abbreviations indicative of corporate character unless the corporation qualifies for one of the exceptions in §301.
- 2. This sample form is provided by the New York State Department of State for filing a certificate of incorporation.
- 3. This form is designed to satisfy the minimum filing requirements pursuant to the Not-for-Profit Corporation Law. The Department of State will accept any other form which complies with the applicable statutory provisions.
- 4. The Department of State recommends that this legal document be prepared under the guidance of an attorney.
- 5. The Department of State does not provide legal, accounting or tax advice.
- 6. This certificate must be submitted with a \$75 filing fee made payable to the Department of State.

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