



# SECRETARY OF THE STATE OF CONNECTICUT

## CERTIFICATE OF INCORPORATION NONSTOCK CORPORATION

### FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS)

**Name:** WILTON ROCKS FOR FOOD  
**Address:** 70 KENSSETT DRIVE  
WILTON  
**City:** WILTON  
**State:** CT **Zip:** 06897  
**Country:** USA

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SECRETARY OF THE STATE OF CONNECTICUT

### 1. NAME OF CORPORATION:

WILTON ROCKS FOR FOOD INC

THE CORPORATION IS NONPROFIT AND SHALL NOT HAVE OR ISSUE SHARES OF STOCK OR MAKE DISTRIBUTIONS.

### 2. PLACE A CHECK NEXT TO THE APPROPRIATE STATEMENT:

- A. THE CORPORATION SHALL NOT HAVE MEMBERS.  
 B. THE CORPORATION SHALL ONLY HAVE MEMBERS, WHICH ARE NOT ENTITLED TO VOTE.  
 C. THE CORPORATION SHALL HAVE ONE CLASS OF MEMBERS.  
 D. THE CORPORATION SHALL HAVE MULTIPLE CLASSES OF MEMBERS WHICH CLASSES ARE DESIGNATED AS FOLLOWS:  
PLEASE NOTE: THE MANNER OF ELECTION AND APPOINTMENT OF MEMBERS ALONG WITH THEIR QUALIFICATIONS AND RIGHTS MAY BE SET FORTH IN THIS CERTIFICATE OR IN THE CORPORATION'S BYLAWS. PLEASE SEE C.G.S. § 33-1055 & - 1056.

### 3. NAICS CODE

62 (Health Care and Social Assistance)

### NAICS SUB CODE

624210 (Community Food Services)

### 4.. APPOINTMENT OF REGISTERED AGENT: (PLEASE SELECT ONLY ONE A. OR B.)

- A. INDIVIDUAL'S AGENT NAME: ANDREW SCHLESINGER

### BUSINESS ADDRESS

**Address:** 70 KENSSETT DRIVE  
**City:** WILTON  
**State:** CT **Zip:** 06897  
**Country:** USA

### RESIDENCE ADDRESS

**Address:** 70 KENSSETT DRIVE  
**City:** WILTON  
**State:** CT **Zip:** 06897  
**Country:** USA

### B: BUSINESS ENTITY AGENT NAME:

### CT BUSINESS ADDRESS

**Address:** NONE  
**City:**  
**State:** **Zip:**  
**Country:**

**ACCEPTANCE OF APPOINTMENT:** [This document has been executed and filed electronically]

ANDREW SCHLESINGER

**SIGNATURE OF AGENT**

**5. THE NATURE OF THE ACTIVITIES TO BE CONDUCTED OR THE PURPOSES TO BE PROMOTED BY THE CORPORATION:**

MUSIC CONCERTS TO RAISE MONEY FOR CT BASED FOOD BANKS

**6. OTHER INFORMATION:**

**7. CORPORATION EMAIL ADDRESS - REQUIRED:** (IF NONE, MUST STATE "NONE.")

WILTONROCKSCT@GMAIL.COM

**8. INCORPORATORS:**

Name of Incorporator	Address of Incorporator
ANDREW SCHLESINGER	<b>Address:</b> 70 KENSETT DRIVE <b>City:</b> WILTON <b>State:</b> CT <b>Zip:</b> 06897 <b>Country:</b> USA

**EXECUTION - REQUIRED:** (SUBJECT TO PENALTY OF FALSE STATEMENT) [This document has been executed and filed electronically]

Dated This 13 Day Of November, 2020

NAME OF INCORPORATOR (print/type)	SIGNATURE (required)
ANDREW SCHLESINGER	ANDREW SCHLESINGER