



State of Hawaii
Department of Commerce and Consumer Affairs
Business Registration Division
335 Merchant Street, Room 201
Mailing Address: P.O. Box 40, Honolulu, HI 96810
Phone: (808) 586-2727
Fax: (808) 586-2733
Email: breg@dcca.hawaii.gov
BusinessRegistrations.com

Nonrefundable Filing Fee: \$50.00

ARTICLES OF INCORPORATION FOR A HAWAII SUSTAINABLE BUSINESS CORPORATION

(Section 414-32, Hawaii Revised Statutes)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. Attachments to this form may be used, if necessary.

The undersigned, for the purpose of forming a sustainable business corporation under the laws of the State of Hawaii, do hereby make and execute these Articles of Incorporation:

1. The name of the corporation shall be:

(The name must contain the word "corporation", "incorporated", or "limited", or the abbreviation "corp.", "inc.", or "ltd.")

2. The number of common shares all of the same class which the corporation has authority to issue is:

3. The mailing address of the corporation's initial principal office is:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

If the address of the corporation's principal office differs from the mailing address, state the address below:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

4. The corporation shall have and continuously maintain in the State of Hawaii, a registered agent who shall have a business address in this State. The agent may be an individual who resides in this State, a domestic entity or a foreign entity authorized to transact business in this State.

Continued on next page.

4a. The corporation's registered agent is (select one):

☐ An Entity

Entity Name

State, Province, or Country of Formation/Incorporation/Organization

☐ An Individual

First Name

Last Name

4b. The street address of the place of business of the registered agent in State of Hawaii to which service of process and other notice and documents being served on or sent to the entity represented by it may be delivered to is:

Country

USA

Address (Number and Street)

Address Line 2 (optional)

City

State

Hawaii

Zip Code

5. The name and address of each individual incorporator is:

Incorporator #1 is:

First Name

Last Name

Incorporator #1 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Incorporator #2 is:

First Name

Last Name

Incorporator #2 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

5.
cont.

Incorporator #3 is:

First Name

Last Name

Incorporator #3 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Incorporator #4 is:

First Name

Last Name

Incorporator #4 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

6.

Section 6 regarding the office titles, names and addresses of all the officers and directors of the corporation is OPTIONAL.

6a. The name and address of each officer is:

Officer #1 is:

Office held:

First Name

Last Name

Officer #1 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Officer #2 is:

Office held:

First Name

Last Name

Officer #2 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

6a.
cont.

Officer #3 is:

Office held:

First Name

Last Name

Officer #3 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Officer #4 is:

Office held:

First Name

Last Name

Officer #4 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Officer #5 is:

Office held:

First Name

Last Name

Officer #5 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Officer #6 is:

Office held:

First Name

Last Name

Officer #6 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

6b. The name and address of each director is:

Benefit Director #1 is:

First Name

Last Name

Benefit Director #1 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Director #2 is:

First Name

Last Name

Director #2 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Director #3 is:

First Name

Last Name

Director #3 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Director #4 is:

First Name

Last Name

Director #4 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

6b.
cont.

Director #5 is:

First Name

Last Name

Director #5 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

Director #6 is:

First Name

Last Name

Director #6 address:

Country

Address (Number and Street)

Address Line 2 (optional)

City

State

Zip Code

7.

The corporation elects to be a sustainable business corporation under chapter 420D. The purpose or purposes for which the corporation is organized, and the general public benefit is:

I/We certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I/we have read the above statements, I/we am/are authorized to execute these Articles of Incorporation, and that the above statements are true and correct to the best of my/our knowledge and belief.

Signed this day of , .

Type/Print Name of Incorporator

Type/Print Name of Incorporator

Signature of Incorporator

Signature of Incorporator

The articles must be signed and certified by at least one incorporator of the corporation. See FORM SBC-1-INSTR (instructions).