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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

LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION

(If not determined, so state)

5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-16, unless a more limited purpose or duration is set forth in paragraph 6 of these Articles of Organization.

PONTEMOUTH RIT 02811

FILED

GEC 1 8 2007

Form No. 400 Revised: 09/06

| Ma | nagement of the Limited Liability Co | mpany: | |
|-------------|--|---|--|
| Α. | The limited liability company is to be no. 8.) | e managed by its members. (If you have checked this box, go to it | |
| | | <u>or</u> | |
| В. | B. The limited liability company is to be managed by one (1) or more managers. (If the limited liab company has managers at the time of the filing of these Articles of Organization, state the name address of each manager.) | | |
| | <u>Manager</u> | <u>Address</u> | |
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| The | e date these Articles of Organization | are to become effective, if later than the date of filing, is: | |
| The | | | |
| The | | e than 30 days after, the filing of these Articles of Organization) | |
| The | | e than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: | |
| The | | e than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: Downd L Mosher | |
| The | | e than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: | |
| The | | e than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: Downd L Mosher 39 この十つ タレ ハレミ Ponナケ Mosth ルズ マンメナ/ Under penalty of perjury, I declare and affirm that I | |
| | (not prior to, nor more | Name and Address of Authorized Person: Dawnd L Masher 39 こう十age Ave Part Moth ルボ るショナー Under penalty of perjury, I declare and affirm that I examined these Articles of Organization, including accompanying attachments, and that all statements conta | |
| | | Name and Address of Authorized Person: Downd L Mosher 39 cottage Ave PoateMoth No 287/ Under penalty of perjury, I declare and affirm that I examined these Articles of Organization, including | |



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

