Filing Fee: \$150	.00 ID Num	ber:	
	STATE OF RHODE ISLAND AND PROVIDENCE PLANTATION Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615	1S 2020 FEB - 8 P	SECULIARY OF RECEIVE

LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION

Pursuant to the provisions of Chapter 7-16 of the General Laws of Rhode Island, 1956, as amended, the following Articles of Organization are adopted for the limited liability company to be organized hereby:

1.	The name of the limited liability company is:			_
	EMBRACE WELLNESS, LLC			_
2.	The address of the limited liability company's resident ag	gent in Rhode Island is:		
		PORTSMOUTH	, RI	02871
	70 WINDSTONE DRIVE (Street Address, not P.O. Box)	(City/Town)		(Zip Code)
		LISA M. DAVIS		
	and the name of the resident agent at such address is	(Name of A	gent)	
3.	Under the terms of these Articles of Organization and ar the limited liability company is intended to be treated for	ny written operating agreement purposes of federal income tax ne box only)	made o xation as	r intended to be made, s:
			ntity sep	parate from its member
4.	The address of the principal office of the limited liability 70 WINDSTONE DRIVE, PORTSMOUTH, RHODE ISL	company if it is determined at t AND 02871	he time	of organization:
	(If not determine	ed, so state)		
5.	The limited liability company has the purpose of engaguntil dissolved or terminated in accordance with Chapte paragraph 6 of these Articles of Organization.	ging in any lawful business, and er 7-16, unless a more limited p	d shall h ourpose	nave perpetual existence or duration is set forth in

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	ompany is formed, and any other previous	which may be included in an operating agreement:
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7. M	lanagement of the Limited Liability Compar	ny:
Α	. The limited liability company is to be ma no. 8.)	naged very by its members. (If you have checked this box, go to item
		<u>or</u>
В	3. The limited liability company is to be company has managers at the time address of each manager.)	managed by one (1) or more managers. (If the limited liability of the filing of these Articles of Organization, state the name and
	<u>Manager</u>	<u>Address</u>
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	UPON FILING	to become effective, if later than the date of filing, is:
	UPON FILING	e to become effective, if later than the date of filing, is: an 30 days after, the filing of these Articles of Organization)
	UPON FILING	
	UPON FILING	an 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person:
	UPON FILING	an 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: EMILY RAHILLY
	UPON FILING	An 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: EMILY RAHILLY 8 BENJAMN DRIVE PORTSMOUTH, RHODE ISLAND 02871 Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including an
	(not prior to, nor more the	An 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: EMILY RAHILLY 8 BENJAMN DRIVE PORTSMOUTH, RHODE ISLAND 02871 Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including an accompanying attachments, and that all statements containe

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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

