Filing Fee: \$150.00	ID Number:
----------------------	------------



## 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**

RECEIVED
SECRITARY OF STATE
CORPOSE AND AND SOLVE

(//:

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:

ŲI (	Organization are adopted for the limited liability company	to be organized hereby.		
1.	The name of the limited liability company is:			
	Soda Motors Auto Sales LLC			
2.	The address of the limited liability company's resident a	agent in Rhode Island is:		
	49 Sherwood Drive	Westerly	, RI 02891	
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)	
	and the name of the resident agent at such address is	Amy K. Dodge, Esquire		
		(Name of Agent)		
3.	the limited liability company is intended to be treated for			
	a partnership <u>or</u> a corporation <u>o</u>	or disregarded as an er	ntity separate from its member	
4.	The address of the principal office of the limited liability 85 Rocky Brook Way Wakefield, Rhode Island 0287	· · · · · · · · · · · · · · · · · · ·	ne time of organization:	
	(If not determine	ed, 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.

Form No. 400 Revised: 09/06 APR 1 1 2008 By 055398 2'//

	ne purpose of this LLC is for the sale o	f automobiles.		
		· .		
Ma	anagement of the Limited Liability Compa	ny:		
A.	The limited liability company is to be ma	anaged very by its members. (If you have checked this box, go to item		
		<u>or</u>		
В.	. The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and			
	company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)			
	Manager	Address		
_	·			
_				
	e date these Articles of Organization are	to become effective, if later than the date of filing, is:		
	oon filing.			
	oon filing.	to become effective, if later than the date of filing, is: n 30 days after, the filing of these Articles of Organization)		
	oon filing.	n 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:		
	oon filing.	n 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  John Patnaude		
	oon filing.	n 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:		
	oon filing.	n 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person: John Patnaude  85 Rocky Brook Way  Wakefield, RI 02879		
	oon filing.	Name and Address of Authorized Person: John Patnaude  85 Rocky Brook Way  Wakefield, RI 02879  Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained		
	oon filing.	Name and Address of Authorized Person: John Patnaude  85 Rocky Brook Way  Wakefield, RI 02879  Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any		
<u>U</u>	oon filing.	Name and Address of Authorized Person: John Patnaude  85 Rocky Brook Way  Wakefield, RI 02879  Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained		
<u>Uj</u>	oon filing.	Name and Address of Authorized Person: John Patnaude  85 Rocky Brook Way  Wakefield, RI 02879  Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained		
	oon filing.	Name and Address of Authorized Person: John Patnaude  85 Rocky Brook Way  Wakefield, RI 02879  Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained herein are true and correct.		