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**

Note that the state of the stat

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:  Half Pint, LLC		<u></u>		
2.	The address of the limited liability company's resident agent in Rhode Island is:				
	One Ship Street	Providence	, RI	02903	
	(Street Address, <u>not</u> P.O. Box)	(City/Town)		(Zip Code)	
	and the name of the resident agent at such address is	Marc A. Greenfield			
		(Name	of Agent)		
3.	Under the terms of these Articles of Organization and at the limited liability company is intended to be treated for	ny written operating agreemer purposes of federal income	ent made or taxation as	r intended to be made, ::	
	(Check or	ne box only)			
	$\checkmark$ a partnership $\underline{or}$ a corporation $\underline{o}$	or disregarded as an	entity sepa	arate from its member	
4.	The address of the principal office of the limited liability company if it is determined at the time of organization: 49-51 Montgomery Street				
	Pawtucket, RI 02860	<del>-</del> ·			
	(If not determine	ed, so state)			
5.	The limited liability company has the purpose of engag until dissolved or terminated in accordance with Chapte paragraph 6 of these Articles of Organization.		FIL FEB 2		

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		<del></del>		
. Mana	Management of the Limited Liability Company:			
	The limited liability company is to b	e managed  wy its members. (If you have checked this box, go to iter		
		<u>or</u>		
•	B. 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 address of each manager.)			
	<u>Manager</u>	<u>Address</u>		
	. A <b>13</b> (1.1)			
	•	are to become effective, if later than the date of filing, is:		
	n filing			
	n filing	e than 30 days after, the filing of these Articles of Organization)		
	n filing	e than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Marc A. Greenfield, Lynch and Greenfield		
	n filing	e than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Marc A. Greenfield, Lynch and Greenfield  One Ship Street		
	n filing	e than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Marc A. Greenfield, Lynch and Greenfield		
	n filing	e than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Marc A. Greenfield, Lynch and Greenfield  One Ship Street  Providence, RI 02903  Under penalty of perjury, I declare and affirm that I have		
	n filing	e than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Marc A. Greenfield, Lynch and Greenfield  One Ship Street  Providence, RI 02903  Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including an accompanying attachments, and that all statements contained		
	n filing	e than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Marc A. Greenfield, Lynch and Greenfield  One Ship Street  Providence, RI 02903  Under penalty of perjury, I declare and affirm that I have		



## 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

