Filing Fee: \$150.00

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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

| ٠ | The name of the limited liability company is: | • | |
|------------|---|--|---|
| | RHODE ISLAND READY MIX, LLC | | |
| <u>.</u> . | The address of the limited liability company's resident a | gent in Rhode Island is: | |
| | 101 High Ridge Drive | South Kingstown | _{, RI} 02879 |
| | (Street Address, not P.O. Box) | (City/Town) | (Zip Code) |
| | and the name of the resident agent at such address is | Michael V. D'Ambra | |
| | and the harne of the resident agent at such address is | (Name of / | Agent) |
| | the limited liability company is intended to be treated for (Check or | | it made or intended to be made, axation as: |
| | | purposes of federal income ta | |
| | (Check or | purposes of federal income tage box only) r disregarded as an e | entity separate from its member |
| | (Check or a partnership or a corporation of the address of the principal office of the limited liability of | purposes of federal income tage box only) The disregarded as an ecompany if it is determined at the company is determin | entity separate from its member |

Form No. 400 Revised: 09/06 14:SING BITAN CCOS

FILED MAY 18 2009

| 6. | Additional provisions, if any, not inconsistent with law, which the men Organization, including, but not limited to, any limitation of the purp company is formed, and any other provision which may be included in | poses or duration for which the limited liabili |
|----|---|--|
| | | |
| | | |
| | | |
| | · · · · · · · · · · · · · · · · · · · | |
| 7. | Management of the Limited Liability Company: | |
| | A. The limited liability company is to be managed very by its member no. 8.) | s. (If you have checked this box, go to iter |
| | <u>or</u> | |
| | | |
| | B. The limited liability company is to be managed by one (company has managers at the time of the filing of these A address of each manager.) | or more managers. (If the limited liabilities of Organization, state the name at |
| | <u>Manager</u> | Address |
| | | |
| | | |
| | | |
| | | |
| | | Always . |
| | | |
| 8. | The date these Articles of Organization are to become effective, if late | r than the date of filing, is: |
| 8. | The date these Articles of Organization are to become effective, if late (not prior to, nor more than 30 days after, the filing of the | · |
| 8. | (not prior to, nor more than 30 days after, the filing of th | ese Articles of Organization) ss of Authorized Person: |
| 8. | (not prior to, nor more than 30 days after, the filing of the Name and Addre John M. Harpoo | ese Articles of Organization) ss of Authorized Person: otian, Esq. ew Blvd., Suite 220 |
| 8. | (not prior to, nor more than 30 days after, the filing of the Name and Address John M. Harpoot 1000 Chapel Vic | ese Articles of Organization) ss of Authorized Person: otian, Esq. ew Blvd., Suite 220 |
| 8. | (not prior to, nor more than 30 days after, the filing of the Name and Address John M. Harpoot 1000 Chapel Vice Cranston, RI 02 Under penalty of examined these | ese Articles of Organization) ss of Authorized Person: otian, Esq. ew Blvd., Suite 220 e920 of perjury, I declare and affirm that I have Articles of Organization, including auttachments, and that all statements contained |



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

