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**

Pursuant to the provisions of Chapter 7-16 of the General Laws of Rhode Island, 1956, as amended, the following Articles

The name of the limited liability co	mpany is:			
Patriot Financial Services, LLC				
The address of the limited liability	company's resident a	gent in Rhode Island is:		
222 Jefferson Blvd Suite 200		Warwick	, RI	02888
(Street Address, <u>not</u> P	.O. Box)	(City/Town)		(Zip Code)
and the name of the resident agent at such address is		InCorp Services, Inc.		
		(Name of Agent)		
	· 721	ne box only)		
a partnership <u>or</u> The address of the principal office  Not determined yet	a corporation o	or disregarded as an		rate from its member of organization:
The address of the principal office	a corporation o	or disregarded as an company if it is determined at		
The address of the principal office	a corporation of the limited liability  (If not determined the purpose of engage cordance with Chapter	disregarded as an company if it is determined at ed, so state)  ing in any lawful business, ar	t the time of	of organization:

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company is formed, and a	t not limited to, any limitation of the purposes or duration for which the limited liabi y other provision which may be included in an operating agreement:
****	
Management of the Limite	Liability Company:
A. The limited liability co no. 8.)	pany is to be managed very by its members. (If you have checked this box, go to ite
	<u>or</u>
	mpany is to be managed by one (1) or more managers. (If the limited liabilers at the time of the filing of these Articles of Organization, state the name a ger.)
<u>Manager</u>	<u>Address</u>
<u></u>	
The date these Articles of	organization are to become effective, if later than the date of filing, is:
(not p	r to, nor more than 30 days after, the filing of these Articles of Organization)
	Name and Address of Authorized Person: Vishruta Parikh
	101 Louise Dr
	Franklin, MA 02038
	Under penalty of perjury, I declare and affirm that I ha examined these Articles of Organization, including a accompanying attachments, and that all statements contain herein are true and correct.
<sub>ate:</sub> 16th June, 2009	J.J. parille
	Signature of Authorized Person



## 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

