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**

| Pu<br>of | rsuant to the provisions of Chapter 7-16 of the General La<br>Organization are adopted for the limited liability company t   | ws of Rhode Island, 1956, a<br>o be organized hereby:         | as amended, the following Articles                                      |  |
|----------|--|---|---|--|
| 1.       | The name of the limited liability company is:  | •   |   |  |
|          | SADGURU, LLC   |   |   |  |
| 2.       | The address of the limited liability company's resident agent in Rhode Island is:  |   |   |  |
|          | 240 Post Road  | Westerly  | . RI 02891  |  |
|          | (Street Address, not P.O. Box)   | (City/Town)   | (Zip Code)  |  |
|          | and the name of the resident agent at such address is  | MITESH PATEL  |   |  |
|          | (Name of Agent)  |   |   |  |
| 4.       | the limited liability company is intended to be treated for purposes of federal income taxation as:  (Check one box only)  a partnership or a corporation or disregarded as an entity separate from its member  The address of the principal office of the limited liability company if it is determined at the time of organization:  240 Post Road, Westerly, Rhode Island 02891 |   |   |  |
|          | (If not determined, so state)  |   |   |  |
| 5.       | The limited liability company has the purpose of engaging until dissolved or terminated in accordance with Chapter 7 paragraph 6 of these Articles of Organization.  | g in any lawful business, an<br>7-16, unless a more limited p | d shall have perpetual existence<br>ourpose or duration is set forth in |  |
|          |  | <b>2</b> 21   | . ED  |  |

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| . Additional provisions, if any, not inconsistent with law, which the members elect to have set forth in these Articles Organization, including, but not limited to, any limitation of the purposes or duration for which the limited liability company is formed, and any other provision which may be included in an operating agreement:                      |  |  |                |                |
|--|--|--|----------------|----------------|
|  |  |  |                |                |
|  |  |  |                |                |
|  |  |  |                |                |
|  |  |  |                |                |
| Management of the Limited Liability Company:   |  |  |                |                |
| A. The limited liability company is to be managed by its members. (If you have checked this box, go to item no. 8.)  Or  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> |
|  |  |  |                |                |
|  |  |  |                |                |
|  |  |  |                |                |
|  |  |  |                |                |
|  |  |  |                |                |
| Upon Filing  | e to become effective, if later than the date of filling, is:  |  |                |                |
| (not prior to, nor more th   | nan 30 days after, the filing of these Articles of Organization)   |  |                |                |
|  | Name and Address of Authorized Person:  Mitesh Patel   |  |                |                |
|  | 26 Courtney Lane   |  |                |                |
|  | Sterling, CT 06377   |  |                |                |
|  | 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. |  |                |                |
| ate: October 5, 2009   | alle -   |  |                |                |
|  | 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

