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**

Ι.	The name of the limited liability company is:  EPORIN, LLC			
2.	The address of the limited liability company's resident agent in Rhode Island is:			
	321 South Main Street, Suite 301	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	Mark G. Sylvia		
		(Name of	Agent)	
	the limited liability company is intended to be treated for  (Check or  a partnership or a corporation or	ne box only)		
		disregarded as an e	entity separate from its member	
<b>t</b> .	The address of the principal office of the limited liability of the Roland P. Cardi, 1681 Quaker Lane, West Warwin	company if it is determined at	,	
<b>!</b> .	The address of the principal office of the limited liability of	company if it is determined at	,	

Form No. 400 Revised: 09/06

**FILED** OCT 28 2009

	lembership interest may only be trans	sferred in accordance with the provision of the Operating	
<u>A</u>	greement.		
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Management of the Limited Liability Company:			
A.	The limited liability company is to be mo. 8.)	nanaged very by its members. (If you have checked this box, go to iten	
		<u>or</u>	
В.	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>	
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	ne date these Articles of Organization are	e to become effective, if later than the date of filing, is:	
Th	The date these Articles of Organization are to become effective, if later than the date of filing, is:  Upon filing of these Articles of Organization		
	pon filing of these Articles of Organiz	ation	
		ation an 30 days after, the filing of these Articles of Organization)	
		an 30 days after, the filing of these Articles of Organization)	
		an 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Mark G. Sylvia, Esquire	
		an 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Mark G. Sylvia, Esquire  321 South Main Street, Suite 301	
		an 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Mark G. Sylvia, Esquire	
		an 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Mark G. Sylvia, Esquire  321 South Main Street, Suite 301	
Uį		an 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Mark G. Sylvia, Esquire  321 South Main Street, Suite 301  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	



## 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

