Filing Fee: \$150.00



## 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 Article

. The	name of the limited liability company is:			
	Psychological & Educational Servic	es LLC		
t. The	address of the limited liability company's resident ag	ent in Rhode Island is:		
1	575 Tarkiln Road, Harrisville		, RI	02830
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)
and	the name of the resident agent at such address is	Diane L. Whipple Phd (Name of A	gent)	
<ol> <li>Under the terms of these Articles of Organization and any written operating agreement made or intended to the limited liability company is intended to be treated for purposes of federal income taxation as:</li> </ol>			ntended to be made,	
	(Check on	e box only)		
	a partnership <u>or</u> a corporation <u>or</u>	x disregarded as an en	tity separ	ate from its member
4. The address of the principal office of the limited liability company if it is determined at the time of orga				organization:
	351 South County Trail, Bldg. 1, Suite	·		•
	•			
	(If not determined	l, so state)		
until	limited liability company has the purpose of engaging dissolved or terminated in accordance with Chapter agraph 6 of these Articles of Organization.	ng in any lawful business, and 7-16, unless a more limited p	shall hav	ve perpetual existence duration is set forth in
			/0:/	6

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Form No. 400 Revised: 09/06

6.	Organization, including, but not limited to, any	th law, which the members elect to have set forth in these Articles of ilmitation of the purposes or duration for which the limited liability			
	company is formed, and any other provision whi	ch may be included in an operating agreement:			
7.	Management of the Limited Liability Company:				
	A. The limited liability company is to be manageno. 8.)	ed X by its members. (If you have checked this box, go to item			
		<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.)				
	Manager	Address			
8.	The date these Articles of Organization are to be	COMe effective if later than the data of filing in.			
	immediately upon				
	(not prior to, nor more than 30	days after, the filing of these Articles of Organization)			
		Name and Address of Authorized Person:			
		Jonathan N. Whipple 1575 Tarkiln Road			
	_				
		Harrisville, RI 02830			
		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.			
Dat	te: <u>May 24, 2010</u>	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

