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 of Organization are adopted for the limited liability company to be organized hereby:

1.	The name of the limited liability company is:  Renaissance Holistic Center LLC			
2.	The address of the limited liability company's resident a	gent in Rhode Island is:		
	39 Beechwood Drive	Cranston	, RI	02921
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)
	and the name of the resident agent at such address is	Nicole Ruggieri Lehourites		
	and the manner of the resident agent at each agent	(Name of Age	nt)	
3.	Under the terms of these Articles of Organization and any written operating agreement made or intended to be made, the limited liability company is intended to be treated for purposes of federal income taxation as:			
	(Check of	ne box only)		
	a partnership <u>or</u> a corporation <u>o</u>	or disregarded as an enti	ty sepa	arate from its member
1.	The address of the principal office of the limited liability	company if it is determined at the	time o	of organization:
	Not determined			
	(If not determine	d, so state)		
5.	The limited liability company has the purpose of engag until dissolved or terminated in accordance with Chapte			

paragraph 6 of these Articles of Organization.

**FILED** 

FEB 07 2011

Form No. 400 Revised: 09/06

		ed to, any limitation of the purposes or duration for which the limited liab vision which may be included in an operating agreement:		
A. The limited liability company is to be managed  by its members. (If you have checked this box, go to it no. 8.)  Of  B. The limited liability company is to be managed  by one (1) or more managers. (If the limited liab company has managers at the time of the filling of these Articles of Organization, state the name address of each manager.)  Manager	None			
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B. The limited liability company is to be managed by one (1) or more managers. (If the limited liab company has managers at the time of the filling of these Articles of Organization, state the name address of each manager.)  Manager Address  The date these Articles of Organization are to become effective, if later than the date of filling, is:  Upon Filling  (not prior to, nor more than 30 days after, the filling of these Articles of Organization)  Name and Address of Authorized Person:  Nicole Ruggieri Lehourites  37 Beechwood Dr.  Cransron, R.P. 2227  Under penalty of perjury, I declare and affirm that I hexamined these Articles of Organization, including accompanying attachments, and that all statements contain herein are true and correct.	Management of the Limited Liability Company:			
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 filling of these Articles of Organization, state the name address of each manager.)  Manager  Address  The date these Articles of Organization are to become effective, if later than the date of filling, is:  Upon Filling  (not prior to, nor more than 30 days after, the filling of these Articles of Organization)  Name and Address of Authorized Person:  Nicole Ruggieri Lehourites  37 Beechwood De.  Cranstan, R.J. 22921  Under penalty of perjury, I declare and affirm that I hexamined these Articles of Organization, including accompanying attachments, and that all statements contain herein are true and correct.		be managed very by its members. (If you have checked this box, go to it		
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(not prior to, nor more than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  Nicole Ruggieri Lehourites  39 Beechwood De.  Cransfon, R.J. 292/ Under penalty of perjury, I declare and affirm that I he examined these Articles of Organization, including accompanying attachments, and that all statements contain herein are true and correct.	<u>Manager</u>	<u>Address</u>		
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AND THE PROPERTY OF THE PROPER	ate. February 7, 2011	Vilali Roma Lama		



## 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

