Filing Fee: \$150.00



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 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:  CAPEWAY Eleaning LLC
2.	The address of the limited liability company's resident agent in Rhode Island is:
	110         EAST ST         PAWTUCKET         , RI         Q8860           (Street Address, not P.O. Box)         (City/Town)         (Zip Code)
	and the name of the resident agent at such address is OSValdo MEDIMA  OSValdo Medina
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 one box only)
	a partnership <u>or</u> a corporation <u>or</u> disregarded as an entity separate from its member
4.	The address of the principal office of the limited liability company if it is determined at the time of organization:
	(If not determined, so state)
	(ii not determined, 50 state)
5.	The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-16, unless a more limited purpose or duration is set forth in paragraph 6 of these Articles of Organization.
	MAY 2 8 2015
Forr	BY 6180152 3:50

Form No. 400 Revised: 09/06

(not prior to, nor more than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  OSVALOO MEDIMA 112 ERST STRO  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.	company is formed, and any other provis	sion which may be included in an operating agreement:
The limited liability company is to be managed by its members. (If you have checked this box, go to item No. 8 – DO NOT LIST ANY NAMES IN SECTION B.)  Or  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 and address of each manager.)  Manager Address  (not prior to, nor more than 30 days after, the filing of these Articles of Organization)  Name and Address of Authorized Person:  OSUBLOC MEDIMA IIS ENST STATE  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.		
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		examined these Articles of Organization, including any accompanying attachments, and that all statements contained
		Original Designation

Signature of Authorized Person

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

