

State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

2015 DEC 114 PH 2: 51

Articles of Organization Limited Liability Company

Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16, the following Articles of Organization are adopted for the limited liability company

to be organized hereby:	The control of the co	
1. The name of the limited liability compa	ny is:	
Page House - Blackstone LLC		
2. The name and address of the limited li	ability company's resident agent in Rhode I	sland is:
Name		
Marvin Barksdale		
Street Address (NOT a P.O. Box)		
1117 Douglas Ave #502		
City/Town	State RHODE ISLAND	Zip Code
North Providence	RHODE ISLAND	02904
a partnership or a corporation or disregarded as an entity sepa 4. The address of the principal office of the	rate from its member ne limited liability company if it is determined	d at the time of organization:
1117 Douglas Ave #502		
City/Town	State	Zip Code
North Providence	RHODE ISLAND	029 9 4
	urpose of engaging in any lawful business, ce with RIGL 7-16, unless a more limited pu n.	

FILED

DEC 14 2015

RY Ch 26324P

2:34

Form No. 400 Revised: 2015

Additional provisions, if any, not of Organization, including, but not company is formed, and any other	limited to, any lir	nitat	tion of the purpo	ose(s) or dura	ation for which the	in these Art Iimited liab	icles ility
				Chec	k this box to indica	ate attachm	ient 🔲
7. The Limited Liability Company is to be managed by:			E - C				2.00
You MUST check one box:			<u> </u>		<u>.</u>		
✓ Its member(s) (If you have cl	hecked this box,	skip	to Section 8. De	o not fill out	the chart below.)		
One (1) or more manager(s)	(If the limited liah	sility	company has n	nanager(s) a	t the time of the fili	ina of these	Articles
of Organization, state the nan							
MANAGER	BUSINESS ADI	DRE	SS	7 2 3 2 3 2 3 3 4 5 4 5 4 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5		1 202 -	. B
						101 - 101 101 - 101	. 4
					· · · · · · · · · · · · · · · · · · ·		d
8. Date when these Articles of Org	ganization will be	effe	ctive: CHECK (ONLY ONE E	BOX		
Date received (Upon filing)							
		_					
Later effective date (Date mu					····		
Under penalty of perjury, I declare	and affirm that I	hav	e examined the	se Articles of	f Organization, inc	luding any	accom-
panying attachments, and that all statements contained Name of Authorized Person			Address				
			1117 Douglas Ave,				
Marvin Barksdale			<u> </u>	, 			
City/Town		Stat		Zip Code			
North Providence		RI		02904			
Signature of Authorized Person					Date		
2206					Dec 14 2015		

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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

