

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

Articles of Organization Limited Liability Company

Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16,	the following Articles of Organizar	tion are adopted for the limite	d liability company
to be organized hereby:	•	•	,,

to be organized nereby:			
1. The name of the limited liability compa	iny is:		
DelRay Properties, LLC		- -	
2. The name and address of the limited lia	ability comp	any's resident agent in Rhode Isla	nd is:
Name			
C.R.S. Management, LLC			
Street Address (NOT a P.O. Box)			
1574 Elmwood Avenue			
City/Town	State PHODE ISLAND		Zip Code
Cranston		RHODE ISLAND	02910
3. Under the terms of these Articles of Org the limited liability company is intended to	ganization a be treated	nd any written operating agreemer for purposes of federal income tax	nt made or intended to be made, ation as (check ONE box):
a partnership or			
a corporation or			
disregarded as an entity separ	rate from its	member	
<u> </u>			
4. The address of the principal office of the	e limited liat	pility company if it is determined at	the time of organization:
Street Address			
1574 Elmwood Avenue			
City/Town	State		Zip Code
Cranston	RI		02910
5. The limited liability company has the pu until dissolved or terminated in accordance Section 6 of these Articles of Organization	e with RIGL	gaging in any lawful business, and 7-16, unless a more limited purpor	shall have perpetual existence se or duration is set forth in

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Form No. 400 Revised: 2015

6. Additional provisions, if any, not inconsistent with law, which the member(s) elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purpose(s) or duration for which the limited liability company is formed, and any other provision which may be included in an operating agreement:							
				Checl	k this box to indicate attachment		
7. The Limited Liability Company	is to be manage	d by	:				
You MUST check one box:							
Its member(s) (If you have o	checked this box,	skip	to Section 8. Do	o not fill out t	the chart below.)		
One (1) or more manager(s of Organization, state the na					the time of the filing of these Articles		
MANAGER	BUSINESS ADDRESS						
Carlene DelNero	1574 Elmwood Avenue Cranston, RI 02910						
	i						
8. Date when these Articles of Or	l ganization will be	effe	ective: CHECK C	NLY ONE B	OX		
Date received (Upon filing)							
					January 2, 2016		
Later effective date (Date must be no more than 30 days from the day of filing)							
Under penalty of perjury, I declar panying attachments, and that all					Organization, including any accom-		
Name of Authorized Person			Address				
Carlene DelNero		1574 Elmwood Avenue		Avenue			
City/Town	* -	Sta	te	Zip Code			
Cranston		RI		02910			
Signature of Authorized Persory	·				Date		
Carlow Sellero					12/21/15		

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

