

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 Organization are adopted for the limited liability company

to be organized hereby:								
1. The name of the limited liability company is:								
Select Medical Billing, LLC								
2. The name and address of the limited liability company's resident agent in Rhode Island is:								
Name								
Edward D. Feldstein, Esq.								
Street Address (NOT a P.O. Box)								
10 Weybosset Street, 8th floor								
City/Town	State RHODE ISLAND		Zip Code					
Providence			02903					
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):								
☐ a partnership or ☐ a corporation or ☐ 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:								
Street Address 400 Bald Hill Road, Suite 530								
City/Town	State		Zip Code					
Warwick	Rhode Island	02886						
5. The limited liability company has the pu until dissolved or terminated in accordanc Section 6 of these Articles of Organization	e with RIGL 7-16, u							

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Form No. 400 Revised: 2015

6. Additional provisions, if any, no of Organization, including, but no company is formed, and any other	t limited to, any li	imita	ition of the purpo	se(s) or dura	to have set forth in these Articles ation for which the limited liability			
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				Chec	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 checked this box, skip to Section 8. Do not fill out the chart below.)								
One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of these Articles								
of Organization, state the name and address of each manager below.)								
MANAGER	BUSINESS AD	DRE	SS					
					<u> </u>			
Jonathan Gershon	400 Bald Hill Road, Suite 530, Warwick, RI 02886							
				- <u> </u>				
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Date when these Articles of Organization will be effective: CHECK ONLY ONE BOX								
	garnzation will be	CIIC	- CILCR C	MEI ONE B	<u> </u>			
✓ Date received (Upon filing)								
Later effective date (Date must be no more than 30 days from the day of filing)								
Under penalty of perjury, I declare panying attachments, and that all					Organization, including any accom-			
Name of Authorized Person			Address					
Edward D. Feldstein			10 Weybosset Street, 8th floor					
City/Town		Stat	te	Zip Code				
Providence		RI		02903				
Signature of Authorized Person		L			Date			
Edward Oddetin					1/19/16			
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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

