

## 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

SECRETARY OF STATE CORPORATIONS DIV

## 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:

1. The name of the limited liability compa	ny is:			
Riffraff, LLC				
2. The name and address of the limited li	ability comp	any's resident agent in Rhode Island	<b>is:</b>	
Name				
Alison Silver				
Street Address (NOT a P.O. Box)				
383 Angell Street, Unit A		•		
City/Town	State RHODE ISLAND		Zip Code	
Providence		KITODE ISEMIND	02906	
3. Under the terms of these Articles of Or the limited liability company is intended to				
a partnership <b>or</b>				
✓ a corporation or				
disregarded as an entity sepa	rate from its	member		
4. The address of the principal office of the	ne limited lial	oility company if it is determined at the	ne time of organization:	
Street Address				
not yet determined				
City/Town	State		Zip Code	
5. The limited liability company has the puntil dissolved or terminated in accordance Section 6 of these Articles of Organization	ce with RIGL			

FILED

FEB 1 1 2016

BY Ch 267398

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 of					·	
One (1) or more manager(s of Organization, state the na					the time of the filing of these Articles	
MANAGER	BUSINESS AD	DRE	<b>55</b>			
	[					
8. Date when these Articles of Or	ı ganization will be	effe	ective: CHECK C	NLY ONE B	<b>OX</b>	
☑ Date received (Upon filing)						
Later effective date (Date m	ust be no more th	an 3	30 days from the	day of filing)		
Under penalty of perjury, I declar	e and affirm that i	l hav	e examined thes	se Articles of	Organization, including any accom-	
panying attachments, and that al	l statements cont	aine		and correct.		
Name of Authorized Person			Address			
Thomas Roberge			410 Clinton Ave	· •		
City/Town		Sta		Zip Code		
Brooklyn		N.	Y	11238		
Signature of Authorized Person					Date	
Chil				February 5, 2016		

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

