

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

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Form No. 400 Revised: 2016

| 6. Additional provisions, if any, not inconsistent of Organization, including, but not limited to, an company is formed, and any other provision where | y limitation of t | he purpose(s) or du | iration for which | rth in these Articles the limited liability | | | | |
|---|----------------------------------|--|--------------------------------|--|--|--|--|--|
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| | | Che | eck this box to inc | dicate attachment | | | | |
| 7. The Limited Liability Company is to be mana | ged by: | | | | | | | |
| You MUST check one box: ✓ Its member(s) (If you have checked this box | ox, skip to Sect | ion 8. Do not fill ou | it 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 ADDRESS | | | | | | | | |
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| 8. Date when these Articles of Organization will | be effective: C | HECK ONLY ONE | BOX | | | | | |
| ✓ Date received (Upon filing) | | | | | | | | |
| Later effective date (Date must be no more | than 30 days | from the day of filin | g) | L. MP48 | | | | |
| Under penalty of penury, kdeclare and affirm the | atil have exam ents contained | ined these Articles herein are true and | of Organization, I correct. | including any | | | | |
| Name of Authorized Person | | Address | | | | | | |
| David Champagne | 12 Tab | 12 Taber Hill Road | | | | | | |
| City/Town | State | Zip Code | | | | | | |
| North Smithfield | RI | 02896 | | | | | | |
| Signature of Authorized Person | | | Date | | | | | |
| · Del Kampagne | | | 3-7 | ² -16 | | | | |

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

