

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

The name of the limited liability compa	env is:		
Greenwood GP, LLC			
2. The name and address of the limited li	ability compa	any's resident agent in Rhode Isla	and is:
Name			
Gina M. Illiano, Esq.			
Street Address (NOT a P.O. Box)			
5 Cathedral Square			
City/Town	State	State PHODE ICLAND	Zip Code
Providence	RHODE ISLAND		02903
the limited liability company is intended to a partnership or a corporation or disregarded as an entity separation	rate from its	member	
4. The address of the principal office of the	e limited liab	ility company if it is determined a	at the time of organization:
Street Address 5 Cathedral Square			
City/Town	State		Zip Code
Providence	RI		02903
5. The limited liability company has the puuntil dissolved or terminated in accordance Section 6 of these Articles of Organization	e with RIGL		

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BY Ch 27/198

Form No. 400 Revised: 2015

6. Additional provisions, if any, not inconsist of Organization, including, but not limited to	o, any limitation of t	he purpose(s) or dur	ation for which the limited liability
company is formed, and any other provision	n which may be inc	luded in an operating	g agreement:
		Chec	ck this box to indicate attachment
7. The Limited Liability Company is to be m	nanaged by:		
You MUST check one box:			
Its member(s) (If you have checked the	is box, skip to Sect	ion 8. Do not fill out	the chart below.)
One (1) or more manager(s) (If the lim	nited liability compa	nv has manager(s) a	t the time of the filing of these Articles
of Organization, state the name and ad			g og o
MANAGER BUSINE	SS ADDRESS		· · · · · · · · · · · · · · · · · · ·
j			
8. Date when these Articles of Organization	will be effective: C	HECK ONLY ONE E	BOX
✓ Date received (Upon filing)			The second
Date received (Opon Illing)			
Later effective date (Date must be no r	nore than 30 days t	from the day of filing)	
Under penalty of perjury, I declare and affin	m that I have exam	ined these Articles of	f Organization including any accom-
panying attachments, and that all statemen			
Name of Authorized Person SCOH GOUDTEAN, SECTEMENT TO COSULE	Address	3	
Contractal Development Group the the		edral Square	
City/Town	State	Zip Code	
Providence	RI	02903	
Signature of Authorized Person	<u> </u>		Date
Mary 11.			2/20/14
DIT WILL	<u>.</u> .		1 7/24/16

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

