

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 DOMESTIC 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 nereby:			
1. The name of the limited liabi	lity company is:		
CUSTOM LIGHTING, LLC	C		
2. The name and address of th	e initial resident agent/	office in Rhode Island is:	
Name JOSEPH RICCI	**************************************		
Street Address (<u>NOT</u> a P.O. Bo 33 MOUNT AVENUE	x)		
City/Town LINCOLN	State	RHODE ISLAND	Zip Code 02865
the limited liability company is i a partnership or a corporation or	icles of Organization a intended to be treated in intended to be treated in intity separate from its	for purposes of federal income tax	ent made or intended to be made, xation as (check ONE box):
		ollity company if it is determined a	t the time of organization:
City/Town LINCOLN	State RHODE I	SLAND	Zip Code 02865
	accordance with RIGL	gaging in any lawful business, and 7-16, unless a more limited purpo	

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6. Additional provisions, if any, no of Organization, including, but no company is formed, and any other	t limited to, any li	mite	ition of the purp	ose(s) or dura	t to have set forth in these Articles ation for which the limited liability agreement:			
Purchase and sales of lighting and supplies								
Check this box to indicate attachment.								
7. The Limited Liability Company is to be managed 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	ADDRESS	- 1						
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8. Date when these Articles of Organization will be effective: CHECK ONLY ONE BOX								
☑ 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 and affirm that I have examined these Articles of Organization, including any								
accompanying attachments, and t	and affirm that I i hat all statements	hav s co	e examined the ntained herein a	se Articles of are true and c	Organization, including any			
Name of Authorized Person		1.	Address		<u> </u>			
JOSEPH RICCI			33 MOUNT	AVENUE				
City/Town			ate Zip Code					
LINCOLN				02865	5			
Signature of Authorized Person				<u> </u>	Date			
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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

