

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 hereby: | | | | |
|--|--------------|--|----------------------|--|
| 1. The name of the limited liability compa | ny is: | | | |
| DISPUTE RESOLU | TION, L | LC | | |
| 2. The name and address of the initial resident agent/office in Rhode Island is: | | | | |
| Name JOHN CANDON | | | | |
| Street Address (NOT a P.O. Box) | | | | |
| 74 LAKEWOOD | DRIVE | | | |
| City/Town NARRAGANGETT | State | RHODE ISLAND | Zip Code 01881 | |
| 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 74 LAKEWOOD | | | | |
| City/Town NARRA GANSETT | State R (| | Zip Code 02 8 8 2 | |
| 5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a more limited purpose or duration is set forth in Section 6 of these Articles of Organization. | | | | |
| | | · · · ———————————————————————————————— | | |

| 10:39 Am |
|--------------------|
| Ellen |
| FILED |
| MAY 18 2016 |
| By 274561 |
| KM |

Form No. 400 Revised: 2016

| of Organization, including, but not limited to, an | with law, which the member(s) elect to have set forth in these Articles by limitation of the purpose(s) or duration for which the limited liability hich may be included in an operating agreement: | | |
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| | Charleshia banda indiada da akan ka | | |
| 7. The Limited Liability Company is to be manage | Check this box to indicate attachment. | | |
| You MUST check one box: | ged by. | | |
| | ox, 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 addres | ss of each manager below.) | | |
| MANAGER ADDRESS | | | |
| JOHN CANDON MARRA | KEWOOD DELVE GAUSETT RI 02882 | | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
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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 accompanying attachments, and that all statements | at I have examined these Articles of Organization, including any ents contained herein are true and correct. | | |
| Name of Authorized Person | Address | | |
| JOHN CANDON | 74 LAKEWOOD DRIVE | | |
| City/Town | State Zip Code | | |
| NARRIGANIETT | R1 02882 | | |
| Signature of Authorized Person Date | | | |
| V = - (| 15 MH 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

