Filing Fee: \$150.00 ID Number: ____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

SECRETARY OF STATE

LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION

Pursuant to the provisions of Chapter 7-16 of the General Laws of Rhode Island, 1956, as amended, 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:
	LONE MOUNTAIN ASSOCIATES, LIC
2.	The address of the limited liability company's resident agent in Rhode Island is:
	245 WATERWAN AK STEILI PROJENK , RI 02906 (Street Address, not P.O. Box) (City/Town) (Zip Code) and the name of the resident agent at such address is FRED POLACEK, ESQ. (Name of Agent)
	(Street Address, <u>not</u> P.O. Box) (City/Town) (Zip Code)
	and the name of the resident agent at such address is FRED FOLACEK, ESQ.
	(Name of Agent)
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 only)
	a partnership <u>or</u> a corporation <u>or</u> disregarded as an entity separate from its member
I.	The address of the principal office of the limited liability company if it is determined at the time of organization:
	(If not determined, so state)

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 Chapter 7-16, unless a more limited purpose or duration is set forth in paragraph 6 of these Articles of Organization.

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Form No. 400 Revised: 09/06

	00,11	pany is formed, and any other provi			
		WAY policy of			
7.	Management of the Limited Liability Company:				
	A	·	managed by its members. (If you have checked this box, go to item		
	<u>or</u>				
	B. The limited liability company is to be managed by one (1) or more managers. (If the limited liab company has managers at the time of the filing of these Articles of Organization, state the name address of each manager.)				
		<u>Manager</u>	<u>Address</u>		
-					
-					
8. 1	The d	D ~ ~ C · ·	re to become effective, if later than the date of filing, is:		
- 8. 1	The c	D ~ ~ C · ·	than 30 days after, the filing of these Articles of Organization)		
8. 1	The d	D ~ ~ C · ·	than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person:		
8. 1 -	The d	D ~ ~ C · ·	than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person:		
8. 1	The c	D ~ ~ C · ·	than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person:		
8. 1 -	The c	D ~ ~ C · ·	than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: Scor Scheek 678 PARIC AVE.		

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

