

## 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 to be organized hereby:

The name of the limited liability compa	iny is:		The second of th
E&P Properties, L.L.C.			
2. The name and address of the limited li	ability company's resident agent	in Rhode Island is:	
Name Thomas M. Tiernan			
Street Address ( <u>NOT</u> a P.O. Box) 62 Buoy Street			
City/Town Jamestown	State RHODE ISLA	ND	Zip Code 02835
3. Under the terms of these Articles of Orthe limited liability company is intended to  a partnership or  a corporation or  disregarded as an entity separation.	be treated for purposes of feder	iting agreement made ral income taxation as	or intended to be made, s (check ONE box):
4. The address of the principal office of th	e limited liability company if it is	determined at the tim	e of organization:
Street Address 62 Buoy Street			
City/Town Jamestown	State Rhode Island		Zip Code 02835
5. The limited liability company has the pu until dissolved or terminated in accordance Section 6 of these Articles of Organization	ce with RIGL 7-16, unless a more	business, and shall he limited purpose or do	ave perpetual existence. uration is set forth in

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Form No. 400 Revised: 2015

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6. Additional provisions, if any, no of Organization, including but not company is formed, and any other							
The purpose of E&P Properties, L.L.C. (hereinafter the "Company") is to engage in the acquisition, development, management and sale of real property located in the State of Rhode Island and for any other lawful activity by the members for which a limited liability company may be formed.							
			Check	this box to indicate attachment			
7. The Limited Liability Company.	is to be managed	by:	19 79				
You MUST check one box:  Its member(s) (If you have compared to the compared t	hecked this box, s	kip to Section 8. Do					
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	BUSINESSADD	RESS					
Thomas M. Tiernan	62 Buoy Street, Ja	mestown, Rhode Islan	nd, 02835				
Teresa M. Tiernan	62 Buoy Street, Jamestown, Rhode Island, 02835						
8. Date when these Articles of Or	ganization will be	effective: CHECK O	NLY ONE B	OX			
☑ 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 effirm that lihave examined these Articles of Organization, including any accom-							
Under penalty of perjury, lideclar panying attachments, and that a	e and affirm that it I statements conte	have examined thes ined herein are true	e Articles of and correct.	Organization, including any accoun-			
Name of Authorized Person		Address					
Raymond A. Tiernan		3299 K Street N	Zip Code				
City/Town	<i>,</i> !	State DC	20007				
Washington			<u> </u>	Date /			
Signature of Authorized Person	1 lawar	_		10/0/16			
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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.