State of Rhode Island and Providence Plantations Department of State - Business Services Division	on	
Articles of Organization DOMESTIC Limited Liability Company → Filing Fee: \$150.00		8.1. DE 3.1. O
Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Orgathe limited liability company to be organized hereby:	nization are adopted for	PA SSED
The name of the limited liability company is:		TE 22
Fitfirst RI LLC		
2. The name and address of the initial resident agent/office in Rhode	Island is:	
Name Jolon D'Connor		
Street Address (<u>NOT</u> a P.O. Box)		
City/Town West warwick	State RHODE ISLAND	Zip Code O2893
3. Under the terms of these Articles of Organization and any written of the limited liability company is intended to be treated for purposes of	pperating agreement made federal income taxation as	or intended to be made, (check ONE box):
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 i	f it is determined at the time	of organization:
Street Address NOt determined		
City/Town	State	Zip Code
5. The limited liability company has the purpose of engaging in any luntil dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a	awful business, and shall ha more limited purpose or du	ave perpetual existence tration is set forth in

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Section 6 of these Articles of Organization.

Phone: (401) 222-3040 **Website:** www.sos.ri.gov

FILED

OCT 24 2016 3:22

By 4 286755

			ect to have set forth in these Articles	
company is formed, and any other			ration for which the limited liability ng agreement:	
		Ch	eck 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 c	hecked this box, skip to	Section 8. Do not fill ou	t the chart below.)	
One (1) or more manager(s)	(If the limited liability co	ompany has manager(s)	at the time of the filing of these Articles	
of Organization, state the nar	me and address of each	manager below.)		
MANAGER	ADDRESS			
Terrell whetstone	2141 west	Shore Rd w	arwick Rt 02909	
	·			
Date when these Articles of Organization will be effective: CHECK ONLY ONE BOX				
Date received (Upon filing)				
Later effective date (Date mu	ist be no more than 30	days from the day of filin	g)	
Under penalty of perjury, I declare accompanying attachments, and				
Name of Authorized Person		ddress	7 00/7001.	
Jolon O'Conna	~	5 emerson	c+.	
City/Town		State	Zip Code	
west warwick		R+	00893	
Signature of Authorized Person	_		Date	
AIGN DOCUMENT HERE		10/24/16		

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

