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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

**Articles of Organization** 

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16</u>, the following Articles of Organization are adopted for the limited liability company to be organized hereby:

the limited liability company to be organized hereby:				
1. The name of the limited liability company is:				
Listamundial. Com LLC				
2. ne name and address of the initial resident agent/office in Rhode Island is:				
Name Eliesel Morales				
Street Address (NOT a P.O. Box)	1 / Social Ent	terprise		
10 Davol Square Unit 100	C/O Green	house		
City/Town	State	Zip Code		
Providence	RHODE ISLAND	02903		
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):				
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 W Davol Square Unit	100 /05	rcial Entroprise Green house		
City/Town roll dence	StateRI	Zip Code 02903		
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.				

MAIL TO:

**Division of Business Services** 148 W. River Street Providence Rhode Island 02904-2615

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

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of Organization, including	g, but not limited to, any li	mitation of the purpose(s) or d	ect to have set forth in these Articles uration for which the limited liability
company is formed, and	any other provision which	n may be included in an operat	ing agreement:
7. The Limited Liability C	ompany is to be managed		neck this box to indicate attachment.
You MUST check one bo	X:	skip to Section 8. <b>Do not</b> fill ou	ut the chart below.)
One (1) or more ma		pility company has manager(s)	at the time of the filing of these Articles
MANAGER	ADDRESS		
<u> </u>	-		
8. Date when these Article	es of Organization will be	effective: CHECK ONLY ONE	вох
Date received (Upon	filing)	···	
Later effective date (	Date must be no more tha	an 30 days from the day of filin	g)
		have examined these Articles s contained herein are true and	
Name of Authorized Person	no, and that all statements	Address	i correct.
Eliesel 1	Norales	155 obe	d ave
City/Town Provid	lnce	State R.I.	Zip Code 02904
Signature of Authorized Pers	. // /	NTHERE	Date 5/1/17
•			

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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:

May 08, 2017 12:28 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

