RI SOS Filing Number: 201743261130 Date: 5/16/2017 1:05:00 PM



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

R.I. MAY 16 PH

Pursuant to the provisions of <u>RIGL 7-16</u> to be organized hereby:	6, the following	g Articles of Organization are adop	oted for the limited liability company
1. The name of the limited liability com	npany is:		
Embedded Systems LLC			
2. The name and address of the limite	d liability com	pany's resident agent in Rhode Is	land is:
Name Amol Shrikant Jadhav			
Street Address (<u>NOT</u> a P.O. Box) 265 Sayles Avenue, Unit 10			
City/Town Pascoag	State	RHODE ISLAND	Zip Code 02859
3. Under the terms of these Articles of the limited liability company is intende			
a partnership or a corporation or disregarded as an entity se	eparate from it	s member	
4. The address of the principal office of	f the limited li	ability company if it is determined	at the time of organization:
Street Address 265 Sayles Avenue, Unit 10			-
City/Town Pascoag	State RI	-	Zip Code 02859
5. The limited liability company has the until dissolved or terminated in accordance Section 6 of these Articles of Organiza	ance with RIG		

FILED

MAY 16 2017

Form No. 400 Revised: 2015

	ot limited to, any li	mita	ition of the purpo	se(s) or dur	et to have set forth in these Articles ation for which the limited liability g agreement:		
				Chec	ck 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 compared to the compared t	checked this box,	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 address of each manager below.)							
MANAGER	BUSINESS ADI	DRE	SS				
•		•					

8. Date when these Articles of Organization will be effective: CHECK ONLY ONE BOX							
Date received (Upon filing)							
Using the control of							
					f Organization, including any accom-		
panying attachments, and that all							
Name of Authorized Person			Address				
Amol Shrikant Jadhav			265 Sayles Avenue, Unit 10				
City/Town		Sta	te	Zip Code			
Pascoag		RI	;	02859			
Signature of Authorized Person					Date		
अम्रोल जाद्यवे.					05/12/2017		

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.

RI SOS Filing Number: 201743261130 Date: 5/16/2017 1:05:00 PM



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 16, 2017 01:05 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

