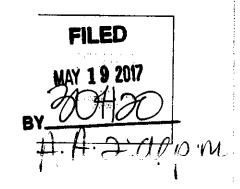
State of Rhode Island and Providence Plantations Department of State - Business Serv	rices Division	В. В. В. В. В. В. В. В. В. В.
Articles of Organization DOMESTIC Limited Liability Company → Filing Fee: \$150.00		
Pursuant to the provisions of RIGL <u>7-16</u> , the following Ar ne limited liability company to be organized hereby:	rticles of Organization are adopted t	for
1. The name of the limited liability company is:		
Ganesh LLC		
<ol><li>The name and address of the initial resident accenticit</li></ol>	fice in Phode Island in	
Name	ffice in Rhode Island is:	·····
Name Corporation Service Company		
Name Corporation Service Company		
Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulev		Zip Code 02888
Name Corporation Service Company Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and	vard, Suite 200 State RHODE ISLAI	ND 02888
Name Corporation Service Company Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for	vard, Suite 200 State RHODE ISLAI	ND 02888
Name Corporation Service Company Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for	vard, Suite 200 State RHODE ISLAI	ND 02888
Name Corporation Service Company Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for partnership or	Vard, Suite 200 State RHODE ISLAI any written operating agreement n r purposes of federal income taxatic	ND 02888
Name Corporation Service Company Street Address (NOT a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for	vard, Suite 200 State RHODE ISLAI any written operating agreement n r purposes of federal income taxatic ember	ND 02888 nade or intended to be made, on as (check ONE box):
Name Corporation Service Company Street Address ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for	State RHODE ISLAI any written operating agreement n purposes of federal income taxatic ember ty company if it is determined at the	ND 02888 nade or intended to be made, on as (check ONE box):
Name Corporation Service Company Street Address (NOT a P.O. Box) 222 Jefferson Boulev City/Town Warwick 3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for	State RHODE ISLAI any written operating agreement n purposes of federal income taxatic ember ty company if it is determined at the	ND 02888 nade or intended to be made, on as (check ONE box):

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 400 - Revised: 09/2016

6 Additional provisions if any			
of Organization, including, but no company is formed, and any othe	ot limited to, any limitation	tion of the purpose(s	(s) elect to have set forth in these Articles ) or duration for which the limited liability perating agreement:
			Check 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 out the chart below.)
One (1) or more manager(s of Organization, state the na	) (If the limited liability me and address of ea	company has manag ch manager below.)	ger(s) at the time of the filing of these Article
MANAGER	ADDRESS		
Ragini Gandhi	23 Chestnut Oak Drive, Cape May Court House, NJ 08210		
	· · · · · · · · · · · · · · · · · · ·		
8. Date when these Articles of Or	ganization will be effe	ctive: CHECK ONLY	ONE BOX
Date received (Upon filing)	····		
Later effective date (Date mi	ist be no more than 2	days from the day.	
accompanying attachments, and	that all statements co	e examined these An Intained herein are tru	ticles of Organization, including any ue and correct.
Name of Authorized Person		Address	
Steven A. Holt, Esq.		3 Becker Farm Rd,	, Ste 105
City/Town		State	Zip Code
Roseland	7	NJ	07068
Signature of Authorized Person	1 1		Date
$\langle \mathcal{H}$	GINOOCLIMENT	HERE	5/18/2017
			•

[5] Managaran C. R. S. Milling, "New Solid Sciences Physics, Phys. Rev. Lett. 8, 100 (1996).

1.5.5

·· 1

1

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.

FORM 400 - Revised: 09/2016

-



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

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 19, 2017 02:06 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

