

State of Rhode Island and Providence Plantations

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

## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00

R.I. DEPT, OF STATE BUS SVCS DIV

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

1. The name of the limited liability company is:

| D(S + e a record | LLC |

Dr.Dr.Steampunk LLC					
2. The name and address of the initial resident agent/office in Rhode	Island is:	· · · · · · · · · · · · · · · · · · ·			
Name Danielle Russo					
Street Address (NOT a P.O. Box)					
149 lowder St	<u> </u>				
City/Town	State	Zip Code			
Pawtucket	RHODE ISLAND	02860			
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 <b>or</b>					
a corporation <b>or</b>					
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 149 lowder - 51					
City/Town Pawfucket	State // /	Zip Code 02860			
5. The limited liability company has the nurnose of engaging in any lawful business, and shall have perpetual existence.					

until dissolved or terminated in accordance with RIGL 7-16, unless a more limited purpose or duration 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

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6. Additional provisions, if any, not inconsistent with law, which the member(s) elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purpose(s) or duration for which the limited liability company is formed, and any other provision which may be included in an operating agreement:						
			Check this I	pox to indicate attachment.		
7. The Limited Liability Company is to be managed by:						
You MUST check one box:  Its member(s) (If you have checked this box, skip to Section 8. <b>Do not</b> 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	ADDRESS					
8. Date when these Articles of Organization will be effective: CHECK ONLY ONE BOX						
Later effective date (Date must be no more than 30 days from the day of filing)						
Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained herein are true and correct.						
Name of Authorized Person		Addr				
Darielle 12 usso 149		19 lowder	St			
City/Town			State	Zip Code		
Pawtucket			RI	02816		
Signature of Authorized/Person		Date				
CONCL STON DOCUMENT HERE			June 2342417			