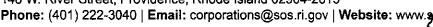
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## State of Rhode Island and Providence Plantations





## **Articles of Organization DOMESTIC Limited Liability Company**

Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16</u> , the to be organized hereby:	ne following	Articles of Organization are adop	oted for the limited liability company			
The name of the limited liability compa	ny is:					
Lorden Surplus Equipment Conpany, LLC						
2. The name and address of the initial resident agent/office in Rhode Island's:						
Name Vicale Adams						
Street Address (NOT a P.O. Box) River Read						
City/Town	State	RHODE ISLAND	Zip Code O2865			
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):						
a 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 79 Twin River Read						
City/Town incc/	State On-	I	Zip Code 55			
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.						
			1:15			
			FILED			
			AUG 01 2017			
Form No. 400 Revised 2016			BY42 309480			

6. Additional provisions if a	nv. not inconsistent w	vith law which the me	ember(s) elect to have set for	th in those Artists
of Organization, including, l company is formed, and an	but not limited to, any	limitation of the purp	ose(s) or duration for which t	he limited liability
	-			
			Check this box to ind	icate attachment. 🔲
7. The Limited Liability Com	pany is to be manage	ed by:		
You MUST check one box:	lave checked this hox	skin to Section 8. D	o not fill out the chart below.	
			•	
of Organization, state the	ger(s) (If the limited lia ne name and address	ability company has r of each manager be	manager(s) at the time of the low.)	filing of these Articles
MANAGER	ADDRESS			
Mirole Adam	ns 279 Tu	SIN RIVER	Road, LINIO	IN RT IDMF
			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	v, record
		······································		<del></del>
			· · · · · · · · · · · · · · · · · · ·	
8. Date when these Articles	of Organization will be	e effective: CHECK (	MI Y ONE BOY	
<u> </u>	<del> </del>	o chicolive. Officer c	JACT ONE BOX	
Date received (Upon fill	ing)			
Later effective date (Da	te must be no more th	nan 30 days from the	day of filing)	
Under penalty of perjury, I de accompanying attachments,	eclare and affirm that	I have examined the	se Articles of Organization, in	ncluding any
Name of Authorized Person	and that an statement	Address	are true and correct.	
Nicole Ada	$2m\varsigma$	279 70	VIN RIVER ROW	/
City/Town	-#- KJ	State	Zip Code	
LINCOLN		RI	02865	
Signature of Authorized Person	$\Omega$		Date /	1
/ Lucle M	1 lidan		08/01	12017.
7		···	<del>-                                    </del>	<del></del>

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: 201748120540 Date: 8/1/2017 1:15:00 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:

August 01, 2017 01:15 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

