RI SOS Filing Number: 201752050840 Date: 10/23/2017 1:57:00 PM



State of Rhode Island and Providence Plantations

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

RECEIVED

R.I. DEPT. OF STATE

BUS SYCS DIV

**Articles of Organization** 

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00

2017 OCT 23 PM 1:57. 7

Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Orga the limited liability company to be organized hereby:	inization are adopted for			
The name of the limited liability company is:				
KJB LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Name Kenneth Bamford				
Street Address (NOT a P.O. Box) 24 Westwood Rd.				
City/Town Lincoln	State RHODE ISLAND	Zip Code 0 2 8 6.5		
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 24 Westwood Rd.				
City/Town LINEOIN	State R.I.	Zip Code り2865		
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 FILED -OCT 23 2017 1:57
BY Cu 315538

Additional provisions, if any, no of Organization, including, but no company is formed, and any other organization.      The Limited Liability Company	it limited to, any limitation er provision which may be	of the purpose(s) or duration for included in an operating agreer	which the limited liability	
You MUST check one box:	is to be managed by.			
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				
Date received (Upon filing)				
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	A	lress 1 G I		
Kenneth Bamford 24 Westwood Rd.				
City/Town		State	Zip Code	
Lincoln		R,I.	02865	
Signature of Authorized Person  Lennett Le	DOC'SALLYT HERE		Date 10 - 23 - 2017	

RI SOS Filing Number: 201752050840 Date: 10/23/2017 1:57:00 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:

October 23, 2017 01:57 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

