RI SOS Filing Number: 201754564750 Date: 12/5/2017 1:07:00 PM



RECEIVED STATE SECRETARY OF STATE CORPORATIONS DIV

Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Organ he limited liability company to be organized hereby:					
1. The name of the limited liability company is:					
854 Taunton Avenue, LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name James P. Redding					
Street Address (NOT a P.O. Box) 27 Sakonnet Point road					
City/Town Little Compton	State RHODE ISLAND	Zip Code 02837			
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(s)					
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:					
Street Address 1300 Pontiac Avenue					
City/Town Cranston	State RI	Zip Code 02920			
5. The limited liability company has the purpose of engaging in any until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a Section 6 of these Articles of Organization.	lawful business, and shall ha a more limited purpose or du	ave perpetual existence uration is set forth in			

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov DEC 05 2017

BY LE 315154

1:07

of Organization, including	, if any, not consistent w ng, but not limited to, an d any other provision wh	ıv limitation o	f the purpose(s) or	ect to have set forth in these Articles duration for which the limited liability ating agreement:	
•					
				Check this box to indicate attachment	
7. The Limited Liability	Company is to be mana	iged by:			
ou MUST check one to the lits member(s) (If y	oox; rou have checked this b	ox, skip to Se	ection 8. Do not fill	out the chart below.)	
—- ☑ One (1) or more m		i liability com	pany has manager	(s) at the time of the filing of these Articles	
MANAGER	ADDRESS	ADDRESS			
3. Date when these Ar	icles of Organization wi	il be effective	: CHECK ONE BO	X ONLY	
✓ Date received (Up	oon filing)				
Later effective dat	e (Date must be no mo	re than 30 da	ys from the date of	filling)	
I Indox nonalty of party	ny I declare and affirm t	hat I have ex	amined these Artic	les of Organization, including any	
accompanying attachments, and that all statements com Name of Authorized Person		ments contain	Address		
James P. Redding		Greenberg Traurig, LLP, One International Place			
City/Town			State	Zip Code	
Boston			ма	02110	
Signature of Authorized Person			<u> </u>	Date	
	\	DOUMENT H	ERE	12/4/2017	
		· · · · · · · · · · · · · · · · · · ·			
		1	1		

RI SOS Filing Number: 201754564750 Date: 12/5/2017 1:07:00 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:

December 05, 2017 01:07 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

