RI SOS Filing Number: 201856598220 Date: 1/23/2018 11:22:00 AM



State of Rhode Island and Providence Plantations

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

## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00

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

The name of the limited liability company is:					
Lyon Property Management, LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name Stephen H Marsella, Esq					
Street Address ( <u>NOT</u> a P.O. Box) 70 Jefferson Boulevard					
City/Town <b>Warwick</b>	State RHODE ISLAND	Zip Code 02888			
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 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 142 Cottage Street					
City/Town Pawtucket	State RI	Zip Code 02860			
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.					

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BY 322402

KM

MAIL TO:

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

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

6. Additional provisions, if any, not consistent 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:					
n/a					
			Chook this h	ox to indicate attachment	
7. The Limited Liability Company	is to be managed by:		Check this be	OX to indicate attachment	
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				
				<u>-</u>	
8. Date when these Articles of Or	ganization will be effe	ctive:	CHECK ONE BOX ONLY	<del>-</del>	
☑ Date received (Upon filing)					
Later effective date (Date must be no more than 30 days from the date 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 Address		<del> </del>			
James murray 142 (OTTA-SE 57.					
City/Town			State	Zip Code	
Pawwalet	<del></del> .		127	09860	
Signature of Authorized Person / Date					
SIGN DOCUMENT HERE					

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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:

January 23, 2018 11:22 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

