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SECRETARY OF STATE CORPORATIONS SIV

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 Organization are adopted for the limited liability company to be organized hereby:					
1. The name of the limited liability company is:					
Judd Transportation LLC.					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name					
James Judd					
Street Address (NOT a P.O. Box)					
55 ITrosvenor Avenue					
City/Town	State	Zip Code			
Pawtucket	RHODE ISLAND	02860			
 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					
55 Grosvenor Avenue					
City/Town Pawtucket	State	Zip Code			
rawtucket	Rhode toland	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 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 FILED
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6. Additional provisions, if any, no of Organization, including, but no company is formed, and any other	t limited to, any limita	tion of the pur	pose(s) or duration for	which the limited liability
•			Check this b	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 o	hecked this box, skip	to Section 8.	Do not fill out the cha	rt below.)
One (1) or more manager(s) of Organization, state the na				ne of the filing of these Articles
MANAGER	ADDRESS			
<u></u>		<u>-</u>		
8. Date when these Articles of Or	<u>l</u> ganization will be effe	ctive: CHECK	ONE BOX ONLY	
Date received (Upon filing)				
Later effective date (Date mo	ust be no more than 3	0 days from th	ne date of filing)	
Under penalty of perjury, I declard accompanying attachments, and				zation, including any
Name of Authorized Person	•	Address	<u>-</u> .	
James Jud	14	55	Grosvenor	Avenue
City/Town		State		Zip Code
Pawticket		Rhox	de Island	02860
Signature of Authorized Person	JIM DOCUMEN	IT HERE		Date
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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:

February 22, 2018 12:37 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

