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State of Rhode Island and Providence Plantations Department of State - Business Services Division	on	SECRETAT CORPOR, 2018 FEB 2		
Articles of Organization		EIVED RY OF ATJOKS 7, PM		
DOMESTIC Limited Liability Company				
→ Filing Fee: \$150.00		3: 05		
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:				
Lannon's Home Improvements LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name Steven Lannon				
Street Address (NQT a P.O. Box)				
16 Wakefield St	r			
City/Town West Warwick	State RHODE ISLAND	Zip Code 02893		
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 14 Wakefield St				
City/Town West Warwick	State R <u>T</u>	Zip Code O2893		
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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MAIL TO: Division of Business Services 148 W. River Street. Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov

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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:					
			Check this b	pox to indicate attachment	
7. The Limited Liability Compar	y is to be managed by:				
You MUST check one box: Its member(s) (If you have checked this box, skip to Section 8. Do not 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 ONE BOX ONLY					
Date received (Upon filing)					
X 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	-		
Steven Lan	non	16	Wakefield	I St	
City/Town		State		Zip Code 02893	
West Warw	ick	K	T	02/27/18	
Signature of Authorized Person		-		Date / /	
sta	SIGN DOCUMENT	ТНЕВЕ		02/27/18	

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.



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

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 27, 2018 03:05 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

