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State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$150.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

| Limited | Liabili | ty Co | ompa | ny |
|----------|---------|-------|-------|----|
| Articles | of Org | janiz | ation | |

(Chapter 7-16-6 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited liability company is: Spa Newport LLC

ARTICLE II

The street address (post office boxes are not acceptable) of the limited liability company's registered agent in Rhode Island is:

No. and Street: 29 UNION STREET

City or Town: PORTSMOUTH State: RI Zip: 02871

The name of the resident agent at such address is: HALLIE SCRABAK

ARTICLE III

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 only

__ a partnership __X a corporation __ disregarded as an entity separate from its member

ARTICLE IV

The address of its principal office of the limited liability company if it is determined at the time of organization:

No. and Street: 29 UNION STREET

City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA

ARTICLE V

The limited liability company has the purpose of engaging in any lawful business, unless a more limited purpose is set forth in Article VI of these Articles of Organization.

The period of its duration is: X Perpetual

ARTICLE VI

Additional provisions, if any, not inconsistent with law, which members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or any other provision which may be included in an operating agreement:

ARTICLE VII

The limited liabilty company is to be managed by its ___ Members or ___ X Managers (check one)

(If managed by Members, go to ARTICLE VIII)

The name and address of each manager (If LLC is managed by Members, DO NOT complete this section):

| Title | Individual Name | Address |
|---------|-----------------------------|---|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| MANAGER | HALLIE SCRABAK | 29 UNION STREET PORTSMOUTH, RI 02871 USA |

ARTICLE VIII

The date these Articles of Organization are to become effective, not prior to, nor more than 30 days after the filing of these Articles of Organization.

Later Effective Date:

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 27 Day of July, 2018 at 3:03:38 PM by the Authorized Person.

HALLIE SCRABAK

Address of Authorized Signer:

29 UNION STREET PORTSMOUTH RHODE ISLAND 02871

Form No. 400 Revised 09/07

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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:

July 27, 2018 02:59 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

