

CORPORATIONS DIV

## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

→ Filing Fee. \$150.00

Pursuant to the provisions of RIGL  $\underline{7-16}$ , 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:					
Legatus Wealth, LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name Richard J. Land, Esq.					
Street Address (NOT a P.O. Box) One Park Row, Suite 300					
City/Town Providence	State RHODE ISLAND	Zip Code 02903			
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	<del></del>				
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 600 Putnam Pike, Suite 4					
City/Town Greenville	State RI	Zip Code 02828			
5. The limited liability company has the purpose of engaging in any la until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a Section 6 of these Articles of Organization.	awful business, and shall ha more limited purpose or du	ive perpetual existence ration 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 FILED

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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 t	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	checked this box, skip	to Se	ction 8. <b>Do not</b> fill out the cha	rt 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					
X 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.					
		ddress			
Jeffrey W. Loring 600		00 Putnam Pike, Suite 4			
City/Town			State	Zip Code	
Greenville			RI	02828	
Signature of Authorized Person	Date				
Jeffrey W. Loring 9/2			9/24/2018		