| State of Rhode Island and Providence Plantations Fee: \$150.00 Office of the Secretary of State | | |
|--|--|--|
| Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 | | |
| Limited Liability Company Articles of Organization (Chapter 7-16-6 of the General Laws of Rhode Island, 1956, as amended) | | |
| ARTICLE I | | |
| The name of the limited liability company is: Macari Construction, 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:242 PLAIN ROADCity or Town:NORTH KINGSTOWNState: RIZip: 02852 | | |
| The name of the resident agent at such address is: <u>JEFFREY MACARI</u> | | |
| 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: <i>Check one box only</i> | | |
| a partnershipa corporation Xdisregarded 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:242 PLAIN ROADCity or Town:NORTH KINGSTOWNState: RIZip: 02852Country: 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 <u>X</u> Members or <u>Managers</u> (check one) | | |

| | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Count |
|---|---|--|
| | | |
| The date these Articles of | | e, not prior to, nor more than 90 days after |
| filing of these Articles of (| - | e, not phor to, nor more than 50 days after |
| Later Effective Date: 03/ | /05/2019 | |
| herein are true, as of th | he date of the electronic filing, in Iarch, 2019 at 7:28:18 PM by th | the company, and that the facts stated compliance with R.I. Gen. Laws § 7-16 ne Authorized Person. |
| Address of Authorized | Signer: | |
| 242 PLAIN ROAD NORTH KINGSTOW | N, RI 02852 | |
| | | |
| Form No. 400 Revised 09/07 | | |
| | | |
| | | |
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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:

March 04, 2019 07:15 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

