RI SOS Filing Number: 201988985280 Date: 3/20/2019 12:46:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

SECRETARY OF STATE CORPORATIONS DIV

Articles of Organization Limited Liability Company Filing Fee: \$150.00

Pursuant to the provisions of <u>RIGL 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:							
La Finca Restaurant LLC							
2. The name and address of the limited liability company's resident agent in Rhode Island is:							
Name							
Fausto A. Pena							
Street Address (NOT a P.O. Box)							
34 Simpson Street							
City/Town	State RHODE ISLAND	Zip Code					
North Providence	KIODE ISLAND	0291i					
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):							
 □ a partnership or ☑ a corporation or □ disregarded as an entity separate from its member 							
4. The address of the principal office of the limited liability company if it is determined at the time of organization:							
Street Address 161 Manton Avenue							
City/Town	State	Zip Code					
Providence	Rhode Island	02909					
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 Section 6 of these Articles of Organization.							

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Form No. 400 Revised: 2015

6. Additional provisions, if any, not inconsistent 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	k this box to indicate attachment		
7. The Limited Liability Company is to be managed by:							
You MUST check one box: Its member(s) (If you have d	hecked this box,	skip	to Section 8. Do	onot fill out ti	he 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	BUSINESS ADDRESS						
8. Date when these Articles of On	ganization will be	effe	ective: CHECK O	NLY ONE B	OX		
✓ Date received (Upon filing)							
Later effective date (Date must be no more than 30 days from the day of filing)							
Under penalty of perjury, I declare panying attachments, and that all					Organization, including any accom-		
Name of Authorized Person			Address				
Fausto A. Pena			34 Simpson Street				
City/Town		Star	te	Zip Code			
North Providence		Rh	hode Island	02911			
Signature of Authorized Person					Date		
Lauxo A Geno					03/19/2019		

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.

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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:

March 20, 2019 12:46 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

