



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

2019 APR - 1 AM 11:57
SECRETARY OF STATE
CORPORATIONS DIVISION
APR 1 2019

Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 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:

MICKEY'S BEAUTY BAR LLC.

2. The name and address of the initial resident agent/office in Rhode Island is:

Agent Name **MARLENE DEFEX**

Street Address (NOT a P.O. Box)
116 BEAUFORT ST.

City/Town **PROVIDENCE**

State **RHODE ISLAND**

Zip Code **02908**

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
105 ATWELLS AVE.

City/Town **PROVIDENCE**

State **RI**

Zip Code **02903**

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.

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, P
APR 01 2019
BY **YTKOV**
11:57

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 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 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
ROB CAPPUCCELLI	110 BEAUFORT ST. PROVIDENCE RI 02908
MARLENE DEFEX	116 BEAUFORT ST. PROVIDENCE RI 02908

8. Date when these Articles of Organization will be effective: **CHECK ONE BOX ONLY**

- ☒ Date received (Upon filing)
- ☐ Later effective date (Date must be no more than 90 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 MARLENE DEFEX		Address 116 BEAUFORT ST.	
City/Town PROVIDENCE		State RI	Zip Code 02908
Signature of Authorized Person MARLENE DEFEX			Date 4/1/19