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2019 APR -25PH13:128

## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>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:  CARCIA SON TRANSPORTATION LI	C			

GARCIA SON TRANSPO.	RTATION L	LC		
2. The name and address of the initial resident agent/office in Rhode Island is:				
AMONIO B GARCÍA				
Street Address (NOT a P.O. Box)  121 WEBSTE1 ST				
City/Town PAWTUCKET	State RHODE ISLAND	Zip Code 0286 /		
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 <b>or</b>	,			
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 121 WEBSTER ST				
City/Town PAWTUCKET	State RI	Zip Code 0286 /		
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

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STALIP

MAIL TO:

**Division of Business Services** 

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

Section 6 of these Articles of Organization.

Phone: (401) 222-3040 Website: www.sos.ri.gov APR 0 2 2019 BY AC F 2810

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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 b	oox 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			
	· · ·			
	<b></b>			
		,	•••	
0.51 1.60 4.51 7.0				
8. Date when these Articles of O	rganization 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 Address				
ANTONIO CANOIA 121 WEBSTEN ST				
<i>,,,</i>	/	, , , , , , , , , , , , , , , , , , ,	<b>~</b>	
PAWTUCKET		State	2ip Code 02861	
Signature of Authorized Person Date				
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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:

April 02, 2019 03:28 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

