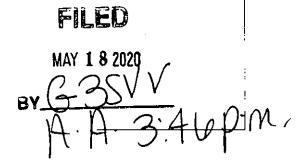
State of Rhode Island and Providence Plantations Department of State - Business Services Division	N 1	RECEIVED DEPT. OF STATE US SVCS DIV			
Articles of Organization DOMESTIC Limited Liability Company	2020 1	IAY 18 PH 3:46			
→ Filing Fee: \$150.00					
Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Orga the limited liability company to be organized hereby:	nization are adopted for				
1. The name of the limited liability company is:					
Prometheus Digital LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name Beth Smith					
Street Address (<u>NOT</u> a P.O. Box) 86 Orient Ave, box 505					
City/Town Jamestown	State RHODE ISLAND	Zip Code 02835			
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 tim	e of organization:			
Street Address 86 Orient Ave, box 505					
City/Town Jamestown	State RI	Zip Code 02835			
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.					

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 400 Revised: 01/2019

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				
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 Addre		Addres	dress · 🕏		
Beth Smith 86 C		86 Or	Orient Ave, box 505		
City/Town		:	State	Zip Code	
Jamestown			RI	02835	
Signature of Authorized Person		Date			
But Subtindocument Here			5/12/20		

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.



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:

May 18, 2020 03:46 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

