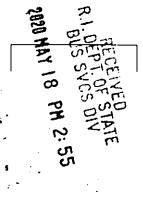
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Articles of Organization

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:						
The name of the limited liability company is:						
GREEN PLACE, LLC						
2. The name and address of the initial resident agent/office in Rhode Island is:						
Agent Name Matthew A. Chappell, Esq.						
Street Address (NOT a P.O. Box) 171 Chase Road						
City/Town Portsmouth	State RHODE ISLAND	Zip Code 02871				
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	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	e of organization:				
Street Address 8 Green Place						
City/Town Newport	State RI	Zip Code 02840				
5. The limited liability company has the purpose of engaging in any launtil dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a Section 6 of these Articles of Organization.	awful business, and shall ha more limited purpose or du	ive perpetual existence ration is set forth in				

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

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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 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		dress				
Matthew A. Chappeell 171		171 Chase Road				
City/Town			State	Zip Code		
Portsmouth			RI	02871		
Signature of Authorized Person			Date			
SIE	GN FOSCUMENT HER			5-15-2020		

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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:

May 18, 2020 02:55 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

