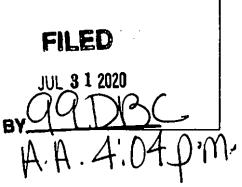
State of Rhode Island and Providence Plantations Department of State - Business Services D	ivision	CEIVED T. OF STATE
Articles of Organization DOMESTIC Limited Liability Company → Filing Fee: \$150.00	BUSS	SVCS DIV SVCS DIV 31 PH 4: 04
the limited liability company to be organized hereby:	ity that will is:	th or without
must be a Rhode Island resident or entity do business in the state. A RHODE ISLA Street Address (NO) address is required, NOT a P.O. B	qualified to ND street Jox. Jox. Jox SHEVENS	ZObilland Zip Code
3. Under the terms of these Articles of Organization and any we the limited liability company is intended to be treated for purpos partnership or a corporation or disregarded as an entity separate from its member(Choose whether your comp a partnership, a corporation an entity separate from its income tax purposes. See	pany will be treated as X):
<u>Gity/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City/Town</u> <u>City</u>	e the principle address of the ompany. If you do not know th state "not yet determ Island limited liability compar ngoing) existence until the LL with this office. All LLCs are o by lawful business unless a m se or duration is stated in Sec	he address yet, ined."

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: 07/2019

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: SHEVENS ROBULARS FEE - MARE SAINT WES						
Carlos Vilar		Fabrini	Saint 4	lves		
Frandini Saint Yves						
Franding output ives						
			Check this bo	x 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	Ad	dress				
Stevens Robelbard 94 Orchard st						
City/Town		State		Zip Code		
Cranston		RI		02910		
Signature of Authorized Person				Date 7/31/20		

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.

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State of Rhode Island 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,

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:

July 31, 2020 04:04 PM

Tullin U. Horler

Nellie M. Gorbea Secretary of State

