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:

R.1. DEP 1. OF STATE BUS SVCS DIV 2021 NAR - 5 PM 12: 2

the limited liability company to be organized hereby:		<u>~</u> → 123		
The name of the limited liability company is:		7		
Eric Leslie Yachting, LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name Gregory F Fater, Esquire				
Street Address (<u>NOT</u> a P.O. Box) 55 Memorial Blvd				
City/Town Newport	State RHODE ISLAND	Zip Code 02840		
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 22 Bartlett Road				
City/Town Middletown	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 7-16, unless a		· · · · · · · · · · · · · · · · · · ·		

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 **FILED**

MAR 0 5 2021

12.27

FORM 400 - Revised: 12/2018

6. Additional provisions, if any, no of Organization, including, but no	t limited to, any limitati	on of the purpose(s	s) or duration for	which the limited liability	
company is formed, and any other provision which may be included in an operating agreement:					
			_		
7. The Use Head Liebility Comment	1- 4- b		Check this bo	ox to indicate attachment L	
7. The Limited Liability Company	is to be managed by:				
You MUST check one box: Its member(s) (If you have o	checked this box, skip t	o Section 8. Do no	t 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				
			<u> </u>		
8. Date when these Articles of O	ganization will be effec	ctive: 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 declar accompanying attachments, and				zation, including any	
Name of Authorized Person		Address			
Eric W. Leslie		22 Bartlett Road			
City/Town	l	State	·	Zip Code	
•				•	
Middletown		RI		02842	
Signature of Authorized Person		· · · · · · · · · · · · · · · · · · ·		Dale /	
SIGN DOCUMENT HERE 2/26/2			2/26/21		
	<u> </u>				