



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$150.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Articles of Organization**

(Chapter 7-16-6 of the General Laws of Rhode Island, 1956, as amended)

**ARTICLE I**

The name of the limited liability company is: Ellabelle Properties, LLC

**ARTICLE II**

The street address (post office boxes are not acceptable) of the limited liability company's registered agent in Rhode Island is:

No. and Street: 117 HIGH STREET

City or Town: WESTERLY

State: RI

Zip: 02891

The name of the resident agent at such address is: MICHAEL P. LYNCH

**ARTICLE III**

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 only*

☐ a partnership ☐ a corporation ☒ disregarded as an entity separate from its member

**ARTICLE IV**

The address of its principal office of the limited liability company if it is determined at the time of organization:

No. and Street:

City or Town:

State:

Zip:

Country:

**ARTICLE V**

The limited liability company has the purpose of engaging in any lawful business, unless a more limited purpose is set forth in Article VI of these Articles of Organization.

The period of its duration is: ☒ Perpetual ☐

**ARTICLE VI**

Additional provisions, if any, not inconsistent with law, which members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or any other provision which may be included in an operating agreement:

THE CONTRIBUTION OF A MEMBER TO THE COMPANY MAY BE MADE, IN WHOLE OR  
IN  
PART, IN CASH, PROPERTY, SERVICES RENDERED OR A PROMISSORY NOTE OR  
OTHER WRITTEN BINDING OBLIGATION TO CONTRIBUTE CASH OR PROPERTY OR TO

PERFORM SERVICES.

THE COMPANY SHALL INDEMNIFY AND HOLD HARMLESS EACH MEMBER, AGENT OR

EMPLOYEE, PAST OR PRESENT OF THE COMPANY ACTING ON BEHALF OF THE  
COMPANY FROM AND AGAINST ANY AND ALL CLAIMS AND LIABILITIES INCLUDING  
ATTORNEY'S FEES TO WHICH EACH PERSON SHALL BECOME SUBJECT BY REASON  
OF

HIS HAVING HERETOFORE OR HEREAFTER TAKEN OR ADMITTED BY HIM IN SUCH  
CAPACITY AND SHALL REIMBURSE EACH SUCH PERSON FOR ALL LEGAL AND OTHER

EXPENSES REASONABLY INCURRED BY HIM IN CONNECTION WITH ANY SUCH  
CLAIM

OR LIABILITY, PROVIDED, HOWEVER, THAT NO SUCH MEMBER, AGENT OR  
EMPLOYEE

SHALL BE INDEMNIFIED AGAINST OR REIMBURSED FOR, ANY EXPENSE INCURRED IN

CONNECTION WITH ANY CLAIM OR CLAIMS MADE AGAINST ANY MEMBER, AGENT  
OR

EMPLOYEE WHICH THE COMPANY HAS DETERMINED TO HAVE RESULTED FROM:

(A) ANY BREACH OF SUCH PERSON'S DUTY OF LOYALTY TO THE COMPANY OR  
ITS MEMBERS;

(B) ACTS OR OMISSIONS NOT IN GOOD FAITH OR WHICH INVOLVE  
INTENTIONAL MISCONDUCT OR KNOWING VIOLATION OF LAW;

(C) A TRANSACTION FROM WHICH THE PERSON SEEKING INDEMNIFICATION  
DERIVED IMPROPER PERSONAL BENEFIT.

#### ARTICLE VII

The limited liability company is to be managed by its   X   Members or      Managers (check one)  
(If managed by Members, go to ARTICLE VIII)

The name and address of each manager (If LLC is managed by Members, DO NOT complete this section):

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

#### ARTICLE VIII

The date these Articles of Organization are to become effective, not prior to, nor more than 90 days after the filing of these Articles of Organization.

Later Effective Date:

*This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

**Signed this 31 Day of March, 2021 at 2:51:22 PM by the Authorized Person.**

MICHAEL P. EMAIL ESQ.

**Address of Authorized Signer:**

117 HIGH STREET, WESTERLY, RI 02891

Form No. 400  
Revised 09/07

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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:

March 31, 2021 02:48 PM

A handwritten signature in blue ink, reading "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea

*Secretary of State*

