RI SOS Filing Number: 202199229060 Date: 7/12/2021 2:26:00 PM



Articles of Organization DOMESTIC Limited Liability Company

→ Filing Fee \$150.00

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2021 JUL 12 P 2: 26

Pursuant to the provisions of RIGL 7-16, the following Articles of Organization are adopted for the limited liability company to be organized hereby 1. The name of the limited liability company is The name and address of the initial resident agent/office in Rhode Island is Agent Name Street Address (NOT a P.O. Box) City/Town State Zip Code RHODE ISLAND ひとうて 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) The address of the principal office of the limited liability company, if it is determined at the time of organization: Street Address City/Town Zip Code State 5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with RIGL 7-16, unless a more limited purpose or duration is set forth in

MAIL TO:

Division of Business Services

Section 6 of these Articles of Organization.

148 W. River Street, Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED JUL 12 2021

BY CO 7PNB 9

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Check this box to indicate attachment To 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 Address Chyfrown State Zip Code O TOGAL Table 22 Date Table 23 Date Table 24 T	6. Additional provisions, if any, of Organization, including, but	not limited to, any limi	tation of the purpose(s) or	duration for which the lin	ese Articles nited liability
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 Address City/Town State Zip Code City/Town City/Town State Zip Code City/Town	company is formed, and any ot	her provision which m	nay be included in an opera	ating agreement:	
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Rainford Brown 1/4 Raphael Ave City/Town State Zip Code Providence AT 02904	accompanying attachments, an		contained herein are true a		
City/Town State Providence Description State Description Descripti	Name of Authorized Person		Address		
Providence 2 PI 02904	hainfovol &	rauh	114 Kapha	icl Ave	
Providence Signature of Authorized Person Date 71221	City/Town	· -	State	Zıp Code	
Signature of Authorized Person Date 7 12 21	louiderore	_	125	02-30	SCD
7/12/21	Signature of Authorized Person	$\frac{1}{2}$	14,7	Date	
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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 12, 2021 02:26 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

