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State of Rhode Island

Department of State - Business Services Division 19 P 1: 46

**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 Orgathe limited liability company to be organized hereby:	inization are adopted for				
The name of the limited liability company is:					
RCOS Multi-services LLC					
2. The name and address of the initial resident agent/office in Rhode	: Island is:				
Agent Name ALexandra Alt Rodríquez					
Street Address (NOT a P.O. Box)					
17 DeTroit AV					
City/Town.	State RHODE ISLAND	Zip Code 02907			
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 17 De TroiT AV		· —			
City/Town	State RT	Zip Code			
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 <u>7-16</u> , unless a more limited purpose or duration is set forth in Section 6 of these Articles of Organization.					

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

OCT 1 9 2021

C Address 1					
6. Additional provisions, if any, not consistent 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.					
7. The Limited Link Rt. Commun.		C	heck 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 c	hecked this box, skip to	Section 8. <b>Do not</b> fill o	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	··-	· · · · · · · · · · · · · · · · · · ·		
Mexandra Rodriga	inz 17 De	froit Av. Po	videnc	e RI 02407	
			<del></del>		
8 Detaulant Atlanta				<u></u>	
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) 0//:1/2099					
Under penalty of perjury, I declare accompanying attachments, and	e and affirm that I have that all statements cont	examined these Article ained herein are true a	s of Organiz nd correct.	ation, including any	
Name of Authorized Person	^	ddress			
Alexandra Ro	driquez	17 DeTroit	AV		
City/Town		State		Zıp Code	
Providence		RI		02907	
Signature of Authorized Person		•		Date	
Austo				10/19/11	
C - E-WWT	<del></del>			1011111	

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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:

October 19, 2021 01:46 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

