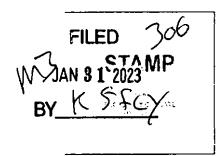
State of Rhode Island Department of State - Business Services Division		RECEIVED		
Articles of Organization DOMESTIC Limited Liability Company → Filing Fee: \$150.00	R.I. DE SUS	N 31 P. 3: 06.		
Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Organization are adopted for the limited liability company to be organized hereby:				
1. The name of the limited liability company is: DURNE MEDLEY GENERAL CONTRACTOR LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name PUANE MEDLEY				
Street Address ( <u>NOT</u> a P.O. Box) 65 NEW RD APT 51				
City/Town RUMFORD	State RHODE ISLAND	Zip Code		
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):				
<ul> <li>partnership or</li> <li>a corporation or</li> <li>disregarded as an entity separate from its member(s)</li> </ul>				
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:				
Street Address				
65 NEW RD City/Town RUMFMD	State R£	Zip Code 02916		
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



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:				
		Check this b	ox to indicate attachment	
7. The Limited Liability Company is to be managed by:				
You <b>MUST</b> check one box: Its member(s) (If you have checked this box, skip to Section 8. <b>Do not fill</b> 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 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	Add			
DUANE MEDLEY 65 NEW RD				
City/Town		State	Zip Code	
RUMFORZ	2	RI	02916	
Signature of Authorized Person Date				
X D Medley			Date 1/31/23	

State of Rhode Island Department of State | Office of the Secretary of State Gregg M. Amore, Secretary of State

I, GREGG M. AMORE, 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:

January 31, 2023 03:06 PM

Treng M. Course

Gregg M. Amore Secretary of State

