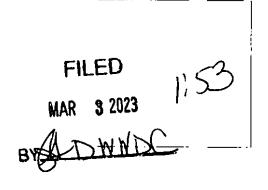
State of Rhode island Department of State - Business Services D		
Articles of Organization DOMESTIC Limited Liability Company	2023	ALL DEPT OF STATE BUS SVCS DIV MAR-3 PM 1:53
$\rightarrow$ Filing Fee: \$150.00 Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of the limited liability company to be organized hereby:		
1. The name of the Limited liability company is:		
CZERFAM,LLC		
2. The name and address of the initial resident agent/office in R	Rhode Island is:	
Agent Name Susan D. D'Amico		
Street Address ( <u>NO</u> T a P.O. Box) 49 Governor Avenue	49 Governor Ave	nue
City/Town Westerly	State RHODE ISLAND	Zip Code 02891
<ol> <li>Under the terms of these Articles of Organization and any wr the limited liability company is intended to be treated for purpos</li> </ol>	itten operating agreement made es of federal income taxation as	or intended to be made. (CHECK ONE BOX):
partnership or		
a corporation <b>or</b>		
disregarded as an entity separate from its member(	s)	
4. The address of the principal office of the limited liability comp	pany, if it is determined at the tim	e of organization:
Street Address 12 Rica Road		
City/fown Westerly	State RI	Zip Code 02891
<ol> <li>The limited liability company has the purpose of engaging in until dissolved or terminated in accordance with RIGL <u>7-16</u>, unli Section 6 of these Articles of Organization.</li> </ol>	any lawful business, and shall hitess a more limited purpose or du	ave neroclual existence

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.r. gov



6. Additional provisions of any	not concistant with the	which the second of a		
of Organization, including, but company is formed, and any c	Lnot limited to, any limita	ition of the purpose(s) a	elect to have set forth in these Articles or duration for which the limited liability erating agreement:	
			operated in the State of Rhode	
Island, including, without	limitation, the leasing	g, rental and mana	gement of real property.	
7. The Limited Liphity Come		· · · · · · · · · · · · · · · · · · ·	Check this box to indicate attachment	
7. The Limited Liability Compa You MUST check one box	any is to be managed by			
Its member(s) (If you hav	e checked this box, skip	to Section 8. Do not fi	IF out the chart below.)	
🛃 One (1) or more manage	r(s) (If the limited liability	company has manage	er(s) at the time of the filing of these Articles	
of Organization, state the	name and address of ea	ach manager below.)		
MANAGER	ADDRESS	ADDRESS		
Lynne A. Czerwinski	116 Brandy Stree	116 Brandy Streeet, Bolton, CT 06043		
steven Czerwins	4 2 Trail Run, Apt	1303. Vernon, CT (	)6066	
···				
8. Date when these Articles of	Organization will be effe	ective: CHECK ONE B		
Date received (Upon filin	g)			
Later effective date (Date	e must be no more than §	and a from the date of the dat	of filing)	
Under penalty of perjury. I dec	dare and affirm that I hav	ve examined these Arti	cles of Organization, including any	
accompanying attachments, a Name of Authorized Person	ind that all statements co	ontained herein are true	e and correct.	
Lynne A. Czerwinski		116 Brandy Stree	t	
C ty/Town		State	Zip Code	
Bolton		СТ	06043	
Signature of Aughorized Person	¥	<u>_</u>	Date	
-12-6-5		March 1, 2023		
		/	t	

.....

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:

March 03, 2023 01:53 PM

Areg M. Couve

Gregg M. Amore Secretary of State

