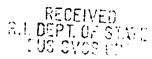
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## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00



2023 APR 12 ₱ 2:02

Pursuant to the provisions of RIGL $7-16$ , the following Articles of Orga the limited liability company to be organized hereby:	nization are adopted for			
The name of the limited liability company is:				
KINS L	LC.			
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name Just Topics				
Street Address (NOT a P.O. Box)  239 Central Aug. 18+ Fl	-			
City/Topus Paustucket	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):				
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 239 Contral Aug 1st FL				
City/Town Par Hacket	State	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 FILED

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	it not limited to, any limita	ation of the purpose(s) or dur	to have set forth in these Articles ration for which the limited liability g agreement:
7. The Limited Liability Comp	sany is to be managed by		eck this box to indicate attachment
You MUST check one box:	any is to be managed by	<b>/</b> .	
	ive checked this box, ski	p to Section 8. <b>Do not</b> fill out	t the chart below.)
One (1) or more manage of Organization, state the			at the time of the filing of these Articles
MANAGER	ADDRESS		
			·····
		. <u> </u>	
8. Date when these Articles of	of Organization will be of	fective: CHECK ONE BOY (	NI V
		IECTIVE. CHECK ONE BOX C	/IIL1
Date received (Upon filin	ng)		
Later effective date (Dat	te must be no more than	90 days from the date of filin	ng)
Under penalty of perjury, I de	eclare and affirm that I ha	ave examined these Articles (	of Organization, including any
accompanying attachments,		contained herein are true and	
Name of Authorized Person		Address	
Junh Joseph		239 Central	Ave 1st IL
City/Town	•	State	Zip Code
Partucket		RI	02860
Signature of Authorized Person	1		Date
Turkosof			04:12:23

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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:

April 12, 2023 02:02 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

