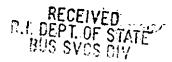
RI SOS Filing Number: 202333527320 Date: 4/21/2023 9:43:00 AM



Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00



2023 APR 21 A 9:43:

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:				
The name of the limited liability company is:		· · ·		
Rhode Islanders Lacrosse Club LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name Timothy John Murphy				
Street Address (<u>NOT</u> a P.O. Box) 76 Basswood Ave.				
City/Town Providence	State RHODE ISLAND	Zip Code 02908		
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:				
76 Basswood Ave.				
City/Town Providence	State RI	Zip Code 02908		
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 q:43

FILED

APR 21 2023

BY ML JMKX 4

₹	not limited to, any limita	tion of the purpose(s)	elect to have set forth in these Articles or duration for which the limited liability erating agreement:	
			Check this box to indicate attachment	
7. The Limited Liability Compar	ny 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 f	ill out the chart below.)	
One (1) or more manager of Organization, state the r			er(s) at the time of the filing of these Articles	
MANAGER	ADDRESS	ADDRESS		
Tim Murphy	76 Basswood Ave., Providence, RI 02908			
8. Date when these Articles of (Organization will be effe	ective: CHECK ONE B	OX ONLY	
✓ Date received (Upon filing)			
Later effective date (Date	must be no more than 9	00 days from the date of	of filing)	
Under penalty of perjury, I declarace accompanying attachments, an			cles of Organization, including any e and correct.	
Name of Authorized Person		Address		
Tlmothy John Murphy		76 Basswood Ave.		
City/Town		State	Zip Code	
Providence		RI	02908	
Signature of Authorized Person			Date	
- My	The		4/20/23	
	/ /			

RI SOS Filing Number: 202333527320 Date: 4/21/2023 9:43:00 AM



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 21, 2023 09:43 AM

Gregg M. Amore

Secretary of State

Tregs M. Coure

