

Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00



7023 HAY -3 P 2: 07 - ...

Pursuant to the provisions of RIGL 7-16, 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: 2. The name and address of the initial resident agent/office in Rhode Island is: Agent Name Street Address (NOT a P.O. Box) City/Town Zip Code **RHODE ISLAND** 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 Zip Code City/Town State 028/16 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 7-16, unless a more limited purpose or duration is set forth in

ENVÍE POR CORREO POSTAL A: Division of Business Services

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

Section 6 of these Articles of Organization.

Teléfono: (401) 222-3040 Sito web: www.sos.ri.gov WAY 03 2023 FA. 1. VRUX6 2:07

FILED

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 box to indicate attachment
7. The Limited Liability Compa	any is to be managed by:
You MUST check one box: Its member(s) (If you have	ve checked this box, skip to Section 8. Do not fill out the chart below.)
	er(s) (If the limited liability company has manager(s) at the time of the filing of these Articles name and address of each manager below.)
MANAGER	ADDRESS
8. Date when these Articles of Organization will be effective: CHECK ONE BOX ONLY	
Date received (Upon filin	g)
Later effective date (Date	must be no more than 90 days from the date of filing)
	declare and affirm that I have examined these Articles of Organization, including any and that all statements contained herein are true and correct.
Name of Authorized Person	Juberman 18 RIVERS Edge DR
City/Town COVer	try State Zip Code OZ8/6
Signature of Authorized Person	Date 5/3/23