



State of Rhode Island

**Department of State - Business Services Division**

**Certificate of Correction**

Limited Liability Company

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Pursuant to the provisions of RIGL 7-16-13 the undersigned limited liability company hereby submits the following Certificate of Correction:

1. Entity ID Number:  001754708	2. The name of the limited liability company is:  CS ORGANICO LLC
3. The document to be corrected is: THE ARTICLES OF ORGANIZATION	
4. The name of the individual(s) who signed the document being corrected is: SAMARIA DEL CARMEN GUZMAN RAMIREZ	
5. The date the document being corrected was originally filed on: MARCH 17, 2023	
6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: LINE 7 WAS NOT COMPLETED PROPERLY. LLC IS TO BE MANAGED BY ITS MEMBERS, NOT MANAGERS AND BY ERROR THERE WERE MANAGER LISTED  <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div>	
7. The new corrected portion of the document states as follows: THIS NEED TO BE BLANK , NO NAMES  <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div>	
8. As required by RIGL <u>7-16-67</u> , the entity has paid all fees and taxes.	

**MAIL TO:**

**Division of Business Services**

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

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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*Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.*

Name of Authorized Person

SAMARIA DEL CARMEN GUZMAN RAMIREZ

Street Address

94 GLENHAM ST 3 FL

City/Town

PROVIDENCE

State

RI

Zip Code

02907

Signature of Authorized Person

*Samaria Ramirez*

Date

05/02/2023