RI SOS Filing Number: 202338588740 Date: 6/22/2023 10:17:00 AM

	State of Rhode Island Department of State - Business Services Division
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Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

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Pursuant to the provisions of RIGL <u>7-16</u> , the following Articles of Orga the limited liability company to be organized hereby:	nization are adopted for					
1. The name of the limited liability company is:						
Olives Pet Grooming LLC						
2. The name and address of the initial resident agent/office in Rhode	Island is:					
Agent Name Jeannette Sullivan						
Street Address (NOI a P.O. Box) 15 Gleaner Chapel Rd						
City/Town N. Scituate	State RHODE ISLAND	Zip Code 02857				
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 Not Yet Determined	}					
City/Town	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						

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Section 6 of these Articles of Organization.

Phone: (401) 222-3040

Website: www.sos.ri.gov

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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:						
7. The 1 (a) is all the 9 is a Common	:- A- b	Check this t	oox to indicate attachment L			
7. The Limited Liability Company	is to be managed by:		-			
You MUST check one box: Its member(s) (If you have o	checked this box, skip to	Section 8. Do not fill out the cha	rt below.)			
One (1) or more manager(s) (If the limited liability cor	mpany has manager(s) at the time	ne of the filing of these Articles			
of Organization, state the 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 filing)						
Later effective date (Date must be no more than 90 days from the date of filing)						
Under penalty of perjury, I declar accompanying attachments, and						
Name of Authorized Person	Ad	dress 15 Gleaner Chap	al Rd			
Jeannette Sull		musa	6, 1-0			
City/Town	· · · · · · · · · · · · · · · · · · ·	State	Zip Code			
N. Scituate		Rhode Island	02857			
Signature of Authorized Person	2.2		Date			
1/80	llion		6/22/23			
	V M W V V					

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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:

June 22, 2023 10:17 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

