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Articles of Organization
DOMESTIC Limited Liability Company

→ Filling Fee: \$150.00

Pursuant to the provisions of RIGL 7-18, the following Arti- he limited fieldliky company to be organized hereby:	icles of Organization are adopted for	
1. The name of the limited flability company is:		•
N. Laudati Excar	vating, LLC	
2. The name and address of the initial resident agent/of	fice in Rhode Island is:	·
Agent Name Bruce A. Leach, Esq.		
Street Address (NOT a P.O. Box) One Turks Head	Place Ste 450	
City/Town Providence	State RHODE ISLAND	Zip Code 02903
3. Under the terms of these Articles of Organization and the limited liability company is intended to be treated for	s eny written operating agreement made r purposes of federal income taxation as	or intended to be made, (CHECK ONE BOX):
partnership or		
a corporation or		•
diaregarded as an entity separate from its m	nember(s)	
4. The address of the principal office of the limited liabil	ity company, if it is determined at the tim	e of organization:
Street Address 47 Sunset Shore Drive		• • •
City/Town Narragansett	State Rhode Island	Zip Code 02882
5. The limited liability company has the purpose of enguntil dissolved or terminated in accordance with RIGL ] Section 8 of these Articles of Organization.	eging in any lewful business, and shall h 7-16, unless a more limited purpose or di	eve perputual existence gration is set forth in

MAIL TO:

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

Phone: (401) 222-3040 Webelle: www.sce.ri.gov JUL 19 2023 BY\_M\_ DIAM 2 3:28

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	ny is to be managed by:			
You MUST check one box:	e checked this box, skip t	to Section 8. Do not fill out th	e chart below.)	
One (1) or more manager of Organization, state the	r(s) (If the limited liability (	company has manager(s) at	the time of the filing of these Articles	
MANAGER	ADDRESS			
8. Date when these Articles of	Organization will be effe	ctive: CHECK ONE BOX ON	LY	
☑ Date received (Upon filing	g)			
Later effective date (Date	must be no more than 9	0 days from the date of filing		
Under penalty of perjury, I dec accompanying attachments, a	dare and affirm that I have and that all statements co	e examined these Articles of ntained herein are true and o	Organization, including any correct.	
Name of Authorized Person		Address		
Nicholas D. Laudati		47 Sunset Shore Drive		
City/Town		State	Zip Code	
Narragansett		Rhode Island	02882	
Signature of Authorized Person  Pucch	oh Carlati		Oate 7/18/2023	