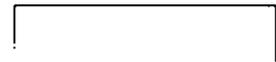




State of Rhode Island  
 Department of State - Business Services Division



**Articles of Organization**

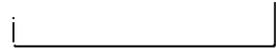
DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV - STAMP

2023 OCT 17 P 1:19

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:		
KAS CONSTRUCTION, LLC		
2. The name and address of the initial resident agent/office in Rhode Island is:		
Agent Name ANTHONY W COFONE		
Street Address (NOT a P.O. Box) 1177 GREENWICH AVENUE		
City/Town WARWICK	State RHODE ISLAND	Zip Code 02886
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):		
<input checked="" type="checkbox"/> a disregarded as an entity separate from its member (single member LLC) <input type="checkbox"/> a partnership <input type="checkbox"/> a corporation		
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:		
Street Address 25 MONTICELLO STREET		
City/Town NORTH PROVIDENCE	State RI	Zip Code 02904
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.		

**FILED**  
**STAMP**  
 OCT 17 2023  
 BY NRGGS  
 1:19

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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 Company is to be managed by its:

You **MUST** check one box:

Members (Owners) **DO NOT** complete the chart below.

OR

Managers (Individuals hired by the members with no ownership interest) Complete the chart below.

MANAGER NAME

ADDRESS

Check this box to indicate attachment

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 declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained herein are true and correct.*

Name of Authorized Person

Address

KENNETH A LAFLAMME

25 MONTICELLO STREET

City/Town

State

Zip Code

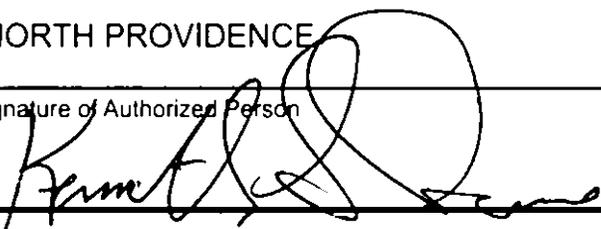
NORTH PROVIDENCE

RI

02904

Signature of Authorized Person

Date



10-17-23

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



State of Rhode Island  
**Department of State | Office of the Secretary of State**  
Gregg M. Amore, *Secretary of State*

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:

October 17, 2023 01:19 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

