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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

Pursuant to the provisions of <u>RIGL 7-16</u> , the following Articles of Orga the limited liability company to be organized hereby:	nization are adopted for				
The name of the limited liability company is:					
BARAHONA DETAILING LLC.					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name Jose Feliz Feliz					
Street Address (NOT a P.O. Box) 12 Maynard St. Apt	1				
Street Address (NOT a P.O. Box)  12 Maynard St. Apt  City/Town  Pautucket	State RHODE ISLAND	Zip Code 02860.			
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):					
a disregarded as an entity separate from its member (single member LLC)					
a partnership					
a corporation					
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:					
102 Aldrich St.					
City/Town Plouidence	State P_I	Zip Code 02905.			
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.

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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:				
		Check	this box to indicate attachment	
7. The Limited Liability Company is to be managed t	y its:			
You MUST check one box:	1	<del></del>	<del></del>	
Members (Owners) DO NOT complete the chart below.		Managers (Individuals hired by the members with no ownership interest) Complete the chart below.		
	MAI	NAGER 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) □ 01/01/202				
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	Addı		<i>c</i> 1 .	
Jose Feliz Feliz	12	2 Maynard	St. Apt 1	
City/Town		State	Zip Code	
Pawtucket		RI	02860	
Signature of Authorized Person	-		Date	
Jord Falis Fels			10/23/23.	

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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:

October 23, 2023 11:35 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

