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State of Rhode Island **Department of State - Business Services Division**

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Articles of OrganizationDOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

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Pursuant to the provisions of RIGL 7-16, the following Articles of Orga	nization are adopted for	1		
the limited liability company to be organized hereby:				
The name of the limited liability company is:				
Ocean Breeze Cuisine, LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name David M. D'Agostino				
Street Address (NOT a P.O. Box) 25 Danielson Pike				
City/Town North 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):				
a disregarded as an entity separate from its member (single member LLC)				
a partnership				
a corporation		1		
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:				
Street Address				
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 Section 6 of these Articles of Organization.				

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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 of Organization, including, but not limited to, company is formed, and any other provision of the Limited Liability Company is to be mar	any limitation of the purp which may be included in	ose(s) or duration for which the limited lial	bility	
You MUST check one box:				
Members (Owners) DO NOT complete the chart be	OR elow.	Manager(s). Complete the chart bel	ow.	
	MANAGER(S) NAME	ADDRESS		
		Check this box to indicate attac	hment 🔲	
8. Date when these Articles of Organization w	vill be effective: CHECK	ONE BOX ONLY		
Date received (Upon filing) Later effective date (Date must be no mo	ore than 90 days from the	e 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			
Aimee Kyne	330 Maunreen Circle			
City/Town	State	Zip Code		
Mapleville	RI	02839		
Signature of Authorized Person Linee Ry	1	Date December 5, 2023		

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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:

December 06, 2023 10:49 AM

Gregg M. Amore Secretary of State

Treg M. Coure

