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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 Organ he limited liability company to be organized hereby:	nization are adopted for		
1. The name of the limited liability company is:			
READ ALL OVER PUBLISHING, LLC			
2. The name and address of the initial resident agent/office in Rhode	Island is:		
Agent Name Philip R. Primeau, Esq.			
Street Address (NOT a P.O. Box) 10 Weybosset Street, Suite 800			
City/Town Providence	State RHODE ISLAND	Zip Code 02903	
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 a partnership a corporation	ngle member LLC)		
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:			
Street Address PO Box 607			
City/Town Warren	State Rhode Island	Zip Code 02885	
5. The limited liability company has the purpose of engaging in any launtil dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a	awful business, and shall ha more limited purpose or du	ave perpetual existence tration is set forth in	

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 inconsistent of Organization, including, but not limited to, a company is formed, and any other provision with the company is formed.	iny limitation of the pur	member(s) elect to have set forth in these Articles urpose(s) or duration for which the limited liability d in an operating agreement:
		Check this box to indicate attachment
7. The Limited Liability Company is to be man	naged by its:	
You MUST check one box:		
Members (Owners) DO NOT complete the chart be	OR elow.	Manager(s). Complete the chart below.
	MANAGER(S) NAME	E ADDRESS
		Check this box to indicate attachment
8. Date when these Articles of Organization w	vill be effective: CHEC	CK ONE BOX ONLY
✓ Date received (Upon filing) Later effective date (Date must be no me	ore than 90 days from	n the date of filing)
Under penalty of perjury, I declare and affirm accompanying attachments, and that all state	that I have examined aments contained here	d these Articles of Organization, including any rein are true and correct.
Name of Authorized Person	Address	
Philip R. Primeau, Esq.	10 Weybosset Street, Suite 800	
City/Town	State	Zip Code
Providence	Rhode Island	nd 02903
Signature of Authorized Person		Date
Philip Primaau		March 5, 2024

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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:

March 21, 2024 12:54 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

