



State of Rhode Island  
Department of State - Business Services Division

REC'D RIDGERS SD  
 27 MAR 27 PM 12:29:55  
 STATE OF RHODE ISLAND  
 DEPARTMENT OF STATE  
 OFFICE ONLY

**Articles of Organization**

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

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:

*Diamond Painting RI LLC*

2. The name and address of the initial resident agent/office in Rhode Island is:

Agent Name

*Laurie Bibby*

Street Address (NOT a P.O. Box)

*857 Greenwich Ave APT 12*

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):

- 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:

Street Address

*857 Greenwich APT 12*

City/Town

*Warwick*

State

*RI*

Zip Code

*02886*

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 7-16, unless a more limited purpose or duration is set forth in Section 6 of these Articles of Organization.

FILED  
 MAR 27 2024  
 BY ML-2VT3J

*1:49*

**MAIL TO:**

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

6. Additional provisions, if any, not inconsistent 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

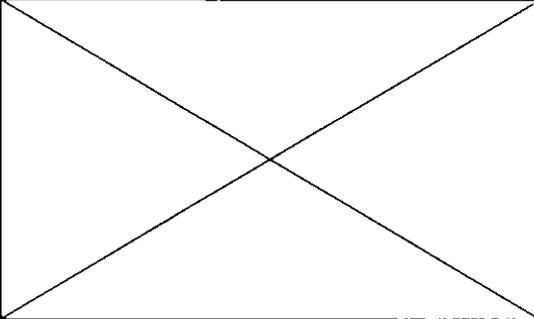
7. The Limited Liability Company is to be managed by its:

You **MUST** check one box:

Members (Owners)  
DO NOT complete the chart below.

OR

Manager(s). Complete the chart below.

	MANAGER(S) 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 <i>Laurie Bibby</i>		Address <i>857 Greenwich Ave. Apt 12</i>	
City/Town <i>Warwick</i>	State <i>RI</i>	Zip Code <i>02886</i>	
Signature of Authorized Person <i>Laurie Bibby</i>		Date <i>3/27/24</i>	

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).