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State of Rhode Island Office of the Secretary of State

Fee: \$150.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Limited Liability Company Articles of Organization

(Chapter 7-16-6 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited liability company is: SAPLING CENTER FOR EARLY LEARNING, LLC

ARTICLE II

The street address (post office boxes are not acceptable) of the limited liability company's registered agent in Rhode Island is:

No. and Street: <u>1 TURKS HEAD PL., FL 11</u>

City or Town: PROVIDENCE State: RI Zip: 02903

The name of the resident agent at such address is: CORPORATE SERVICE CENTER, INC.

ARTICLE III

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 only

disregarded as an entity s	separate from its member	a partnership _2	K a corporatior
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ARTICLE IV

The address of its principal office of the limited liability company if it is determined at the time of organization:

No. and Street: 69 HAYES ST

City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA

ARTICLE V

The limited liability company has the purpose of engaging in any lawful business, unless a more limited purpose is set forth in Article VI of these Articles of Organization.

The period of its duration is: X Perpetual

ARTICLE VI

Additional provisions, if any, not inconsistent with law, which members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or any other provision

which may be included in an operating agreement:				
ARTICLE VII				
The limited liability comp	any is to be managed by its M	embers* or <u>X</u> Managers (check one)		
•	• • • • • • • • • • • • • • • • • • • •	wners) DO NOT complete the following ed to be managed by MANAGERS.		
The name and address of	each manager:			
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country		
MANAGER	JUSTIN DOUCETTE	69 HAYES ST WOONSOCKET, RI 02895 USA		
MANAGER	RACHAEL MOLANDER	69 HAYES ST WOONSOCKET, RI 02895 USA		
ARTICLE VIII				
The date these Articles of the filing of these Articles	_	tive, not prior to, nor more than 90 days after		
Later Effective Date:				
This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.				
Signed this 1 Day of May, 2024 at 4:30:46 PM by the Authorized Person.				
JUSTIN DOUCETTE				
Address of Authorized 69 HAYES ST	Signer:			
WOONSOCKET				
<u>RI</u> <u>02895</u>				
Form No. 400 Revised 09/07				

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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:

May 01, 2024 04:29 PM

Gregg M. Amore Secretary of State

Treg M. Coure

