



**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

FILED 7:51

MAY 18 2024 AM

BY 1184047

**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: Max Foam RI, 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: 845 ALLENS AVECity or Town: PROVIDENCE

State: RI

Zip: 02905The name of the resident agent at such address is: MAYELIN PACHECO**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 separate from its member ☐ a partnership ☐ a corporation**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: 845 ALLENS AVECity or Town: PROVIDENCEState: RIZip: 02905Country: 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: ☒ 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 company is to be managed by its ☒ Members\* or ☐ Managers (check one)

\* If you checked to be managed by your MEMBERS (the owners) DO NOT complete the following section. Only complete the following section if you checked to be managed by MANAGERS.

The name and address of each manager:

Name	Address Address, City or Town, State, Zip Code, Country
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#### ARTICLE VIII

The date these Articles of Organization are to become effective, not prior to, nor more than 90 days after the filing of these Articles of Organization.

Later Effective Date: 06/01/2024

#### Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: MAYELIN PACHECO NUNEZ

Business Name: MAX FOAM RI

No. and Street: \_\_\_\_\_

City or Town: \_\_\_\_\_ State: \_\_\_\_\_ Zi. \_\_\_\_\_ Country: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

*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 23 Day of May, 2024 at 2:17:03 PM by the Authorized Person.

MAYELIN PACHECO NUNEZ

Address of Authorized Signer:

188 LAURENS ST CRANSTON RI 02910

Make Corrections

Accept

Form No. 400  
Revised 09/07

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State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

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 18, 2024 07:51 AM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

