

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

Articles of OrganizationDOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of <u>RIGL 7-16</u> , the following Articles of Orgathe limited liability company to be organized hereby:	nization are adopted for		
The name of the limited liability company is:			
JERRICO & CO LLC			
2. The name and address of the initial resident agent/office in Rhode	Island is:		
Agent Name DEBIZA MITCHELL, 42 JENK'S	DR, Comperus	∧D .	
Street Address (NOT a P.O. Box)			
42 JENK'S DENE			
City/Town	State	Zip Code	
CUMBERLAND	RHODE ISLAND	02863	
 Under the terms of these Articles of Organization and any written of the limited liability company is intended to be treated for purposes of 			
a disregarded as an entity separate from its member (sin	ngle 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			
3388 WEST SHORE RD			
City/Ţown₄	State	Zip Code	
WARNICK,	RI	02886	
 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 Section 6 of these Articles of Organization. 		• •	

MAY 3 1 2024 * **

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

	any limitation of the p	member(s) elect to have set forth in these Articles ourpose(s) or duration for which the limited liability ed in an operating agreement:
		Check this box to indicate attachment
7. The Limited Liability Company is to be ma	naged by its:	
You MUST check one box:		
Members (Owners) DO NOT complete the chart t	OR pelow.	Manager(s). Complete the chart below.
	MANAGER(S) NAM	ADDRESS 338 ARST WARE
	DSEPH Z.	ROSSI WHEICK, RI OZERS
		,
		Check this box to indicate attachment
8. Date when these Articles of Organization	will be effective: CHEC	CK ONE BOX ONLY
Date received (Upon filing)		
Later effective date (Date must be no m	ore than 90 days from	n the date of filing)
		I these Articles of Organization, including any
accompanying attachments, and that all state Name of Authorized Person	Address	ein are true and correct.
	1	
ELOSSI E. KOSSI	2288 WE	EST SHOKE RD
City/Town	State	Zip Code
WARWICK	RI	07886
Signature of Authorized Person	من	Date 5/31/2024