RI SOS Filing Number: 202456971600 Date: 6/18/2024 11:02:00 AM



State of Rhode Island

Department of State - Business Services Division

REC'D RIDOS BSD '24 JUN 18 AM11:02:18

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 Orgathe limited liability company to be organized hereby:	anization are adopted for			
The name of the limited liability company is:	····			
Elli/A construction //c				
2. The name and address of the initial resident agent/office in Rhode	e Island is:			
Agent Name				
Street Address (NOT a P.O. Box)				
Street Address (NOT a P.O. Box)				
24 Forsythia In				
0.137.101111	State	Zip Code		
Cranston	RHODE ISLAND	02921		
3. Under the terms of these Articles of Organization and any written the limited liability company is intended to be treated for purposes of				
a disregarded as an entity separate from its member (si	ingle member LLC)			
a partnership				
a corporation				
4. The address of the principal office of the limited liability company,	if it is determined at the tin	ne of organization:		
Street Address 24 For Syland And				
City/Town	State RF	Zip Code		
Cranston	KT	02921		
5. The limited liability company has the purpose of engaging in any luntil dissolved or terminated in accordance with RIGL 7-16, unless a				
Section 6 of these Articles of Organization.	i more inflited purpose or d	diddon is sectoral 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 FILED 1402

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BY ZM KVG

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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:				
		_		
	<u>.</u>	Check this box to indicate attachment		
7. The Limited Liability Company is to be man	aged by its:			
You MUST check one box:				
Members (Owners)		inager(s). Complete the chart below.		
DO NOT complete the chart below.				
	MANAGER(S) NAME	ADDRESS		
	Ronny Nora	24 forsythia la		
. \	1- only Jobeth	27 1-109 14/4		
	3	·		
\times				
				
		Check this box to indicate attachment		
8. Date when these Articles of Organization will be effective: CHECK ONE BOX ONLY				
☑ Date received (Upon filing)				
De de received (opon ming)				
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 Address				
Russy Marc	24 forsytu,	/1		
Kuny Nova	21 10109 747			
City/Town —	State	Zip Code		
0	1/2			
(101570n	KF	02921		
Signature of Authorized Person	<u> </u>	Date		
		,		
K		6/18/2024		

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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:

June 18, 2024 11:02 AM

Gregg M. Amore

Secretary of State

Tregs M. Coure

