RI SOS Filing Number: 202459062800 Date: 8/27/2024 12:46:00 AM



# 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)

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|----|--|--|--|
|    |  |  |  |
|    |  |  |  |

The name of the limited liability company is: TnT Brokerage 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: 47 WOOD AVE SUITE 2

City or Town: BARRINGTON State: RI Zip: 02806

The name of the resident agent at such address is: NORTHWEST REGISTERED AGENT LLC

#### **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

X 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: 41 N LOXLEY DR

City or Town: <u>JOHNSTON</u> State: <u>RI</u> Zip: <u>02919</u> Country: <u>US</u>

### **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   |   |
|---------------------------|---|---|
| e limited liability compa | any is to be managed by its Men                             | nbers* or <u>X</u> Managers (check one                  |
|                           |   |   |
| e name and address of     | each manager:   |   |
| e name and address of     | each manager:  Individual Name  First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |

Later Effective Date:

filing of these Articles of Organization.

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 27 Day of August, 2024 at 12:48:09 AM by the Authorized Person.

## **TIMOTHY O JOHNSON**

**Address of Authorized Signer:** 

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:

August 27, 2024 12:46 AM

Gregg M. Amore Secretary of State

Treg M. Coure

