RI SOS Filing Number: 202459104140 Date: 8/28/2024 10:33:00 AM



State of Rhode Island

Department of State - Business Services Division

Articles of Organization DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

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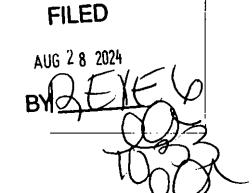
Pursuant to the provisions of <u>RIGI_7-16</u> , the following Articles of Organization are adopted for the limited liability company to be organized hereby:				
The name of the limited liability company is:				
B&B COSTA LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name PAUL G BETTENCOURT, ESQ				
Street Address (NOT a P.O. Box) 197 WARREN AVENUE :				
City/Town EAST PROVIDENCE	State RHODE ISLAND	Zip Code 02914		
3. 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):				
a disregarded as an entity separate from its member (single 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 265 BEVERAGE HILL AVENUE				
City/Town PAWTUCKET	State RI	Zip Code 02860		
5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a more limited purpose or duration is set forth in Section 6 of these Articles of Organization.				

MAIL TO:

Division of Business Services

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

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



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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 v	· ·			
NONE				
		Check this box to indicate attachment		
7. The Limited Liability Company is to be man	naged by its:			
You MUST check one box:				
Members (Owners) OR DO NOT complete the chart below. Manager(s). Complete the chart below.				
DO NOT complete the chart of		1:000000		
	MANAGER(S) NAME	ADDRESS		
<u> </u>		Check this box to indicate attachment		
9. Data whose those Articles of Organization u	III ha affadina: CHECK			
8. Date when these Articles of Organization will be effective: CHECK ONE BOX ONLY				
✓ Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the date of filing)				
Under penalty of perjury, I declare and affirm accompanying attachments, and that all state				
Name of Authorized Person	Address			
PAUL G BETTENCOURT	197 WARREN AVENUE SUITE 201			
City/Town	State	Zip Code		
EAST PROVIDENCE	RI	02914		
Signature of Authorized Person		Date		
(tombe Belleven	X	8/22/2024		

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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:

August 28, 2024 10:33 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

