F					
	State of Rhode I Office of the Secreta		Fee: \$150.00		
Division Of Business Services					
148 W. River Street					
Providence RI 02904-2615					
1636	<b>1636</b> (401) 222-3040				
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: <u>ADVENTOURINC LLC</u>					
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:	2 SAWYER STREET				
	PROVIDENCE, RI 02907				
City or Town:		State: RI	Zip: <u>02907</u>		
The name of the resident agent at such address is: <u>LUIS D. RODRIGUEZ</u>					
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: <i>Check one box only</i>					
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:	<u>555 NORTH MAIN STREET</u>				
Oite e T	NUM1355	toto, DI 7:	ountry, LIC A		
City or Town:	<u>PROVIDENCE</u> Si	tate: <u>RI</u> Zip: <u>02904</u> C	ountry: <u>USA</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 du	The period of its duration is: <u>X</u> Perpetual				

	ARTICLE V	I
Articles of Organization, in	-	hich members elect to have set forth in these y limitation of the purposes or any other nent:
	ARTICLE V	I
The limited liability compa (check one)	ny is to be managed by its _	_ Members* or <u>X</u> Managers
•		e owners) DO NOT complete the following ecked to be managed by MANAGERS.
The name and address of		
	_	
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	LUIS D. RODRIGUEZ	2 SAWYER STREET PROVIDENCE, RI 02907 USA
The date these Articles of after the filing of these Art	-	ffective, not prior to, nor more than 90 days
Later Effective Date: 09/12	2/2024	
affirmation or acknowledge that individual's act and d	gement of the signatory, unde eed or the act and deed of the	s signing this instrument constitutes the c penalties of perjury, that this instrument is company, and that the facts stated herein ance with R.I. Gen. Laws § 7-16.
Signed this 12 Day of Se	ptember, 2024 at 9:01:48 A	M by the Authorized Person.
<u>LUIS D RODRIGUEZ</u>		
Address of Authorized & <u>2 SAWYER STREET</u> PROVIDENCE, RI 0290 <sup>7</sup>		

Form No. 400 Revised 09/07 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:

September 12, 2024 09:01 AM

Areg M. Couve

Gregg M. Amore Secretary of State

