RI SOS Filing Number: 202460848400 Date: 10/28/2024 12:30:00 PM



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 Organization are adopted for the limited liability company to be organized hereby:				
1. The name of the limited liability company is:				
TSP CACHE HAIR 3		LLC		
2. The name and address of the initial resident agent/office in Rhode Island is.				
Agent Name TUSE TADIA				
Street Address (<u>NOT</u> a P.O. Box)				
87 TOLL GATE RD				
City/Town	State	Zip Code		
WADWICK	RHODE ISLAND	02886		
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 145 WAPWICK AVE				
CITY/Town CRANSTON	State P.T	Zip Code 02 90 5		
5. 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.				

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

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:				
			Check this box to indicate attachment	
7. The Limited Liability Company is to be mana	aged by its.			
You MUST check one box:				
Members (Owners) DO NOT complete the chart be	OR low.	Мапа	ger(s). Complete the chart below.	
	MANAGER(S) NAM	E	ADDRESS	
Check this box to indicate attachment				
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 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			
TOSE TAPIA	87 TOLL GATE RD.			
City/Town	State		Zip Code	
WARWICK	2.I		02886	
Signature of Authorized Person			Date	
Sch			10.28.24	

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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:

October 28, 2024 12:30 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

