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Articles of OrganizationDOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

the limited liability company to be organized hereby: 1. The name of the limited liability company is:				
FOR REAL NRT PRODUCTION LLC				
2. The name and address of the initial resident agent/office in Rhode Island is:				
Agent Name RACHIDA ABOULFATAH				
Street Address (NOT a P.O. Box) 30 MONTICELLO ROAD, SUITE 2042				
City/Town PAWTUCKET	State RHODE ISLAND	Zip Code 02861		
 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): 				
Under the terms of these Articles of Organization and any written the limited liability company is intended to be treated for purposes.	n operating agreement made of federal income taxation as	or intended to be made, (CHECK ONE BOX):		
Under the terms of these Articles of Organization and any written the limited liability company is intended to be treated for purposes a disregarded as an entity separate from its member (of federal income taxation as	or intended to be made, (CHECK ONE BOX):		
the limited liability company is intended to be treated for purposes	of federal income taxation as	or intended to be made, (CHECK ONE BOX):		
the limited liability company is intended to be treated for purposes a disregarded as an entity separate from its member (of federal income taxation as	or intended to be made, (CHECK ONE BOX):		
the limited liability company is intended to be treated for purposes a disregarded as an entity separate from its member (a partnership	of federal income taxation as single member LLC)	(CHECK ONE BOX):		
the limited liability company is intended to be treated for purposes a disregarded as an entity separate from its member (a partnership a corporation	of federal income taxation as single member LLC)	(CHECK ONE BOX):		

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 06 2025

FILED

FORM 400 - Revised: 12/2023

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 managed by its:				
You MUST check one box:	<u> </u>			
Members (Owners) DO NOT complete the chart be	OR elow.	Manager(s). Complete the chart below.		
	MANAGER(S) NAME	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 mo	re than 90 days from	the date of filing)		
Under penalty of perjury, I declare and affirm a accompanying attachments, and that all state				
Name of Authorized Person	Address			
RACHIDA ABOULFATAH	30 MONTICELLO ROAD, SUITE 2042			
City/Town	State	Zip Code		
PAWTUCKET	RI	02861		
Signature of Authorized Person		Date		
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