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State of Rhode Island

Department of State - Business Services Division

STAM 17 AH LO: 48: OF SECRETARY OF SECRETARY

Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of <u>RIGL 7-16</u> , the following Articles of Orga the limited liability company to be organized hereby:	nization are adopted for			
The name of the limited liability company is:				
Natareno Pro Fence	LLC			
2. The name and address of the initial resident agent/office in Rhode	Island is:			
Agent Name John Dave Natar	ChO			
Street Address (NOT a P.O. Box)		-		
L3 N Bend St				
City/Town Pawtucket	State RHODE ISLAND	Zip Code CO		
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 (si	ngle 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 3 N Bend 5+				
City/Town	State	Zip Code (00)		
PAWTUCKET	L K J	· 		
5. The limited liability company has the purpose of engaging in any launtil dissolved or terminated in accordance with RIGL 7-16, unless a		• •		

MAIL TO:

Division of Business Services

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

Section 6 of these Articles of Organization.

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

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6. Additional provisions, if any, not inconsiste of Organization, including, but not limited to,			
company is formed, and any other provision			
			Check this box to indicate attachment
7. The Limited Liability Company is to be ma	naged by its:		
You MUST check one box:			-
Members (Owners) DO NOT complete the chart to	OR pelow.	Mana	ger(s). Complete the chart below.
	MANAGER(S) NAME		ADDRESS
		C	Check this box to indicate attachment
8. Date when these Articles of Organization	will be effective: CHECH	ONE BOX	ONLY
Date received (Upon filing)			
Later effective date (Date must be no m	•		
Under penalty of perjury, I declare and affirm accompanying attachments, and that all state	that I have examined to ements contained herei	hese Articles n are true and	of Organization, including any d correct.
Name of Authorized Person	Address		<u> </u>
John Dave Natureno	3 N 7	Bend	st
City/Town	State		Zip Code
Pawtucket	RI		07860
Signature of Authorized Person			Date
1 Denill			1/17/25
			1 10

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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:

January 17, 2025 10:48 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

