



**State of Rhode Island
Office of the Secretary of State**

Fee: \$150.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(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: SmartLedger LLC

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: 60 SUFFOLK DRIVE

City or Town: NORTH KINGSTOWN

State: RI

Zip: 02852

The name of the resident agent at such address is: DANIEL JOHNSON

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:

Check one box only

☒ 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: 60 SUFFOLK DRIVE

City or Town: NORTH KINGSTOWN

State: RI

Zip: 02852

Country: USA

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 duration is: ☒ Perpetual ☐

ARTICLE VI

Additional provisions, if any, not inconsistent with law, which members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or any other

provision which may be included in an operating agreement:

1. LIMITATION OF LIABILITY:
NO MEMBER OR MANAGER OF THE LLC SHALL BE PERSONALLY LIABLE FOR THE DEBTS, OBLIGATIONS, OR LIABILITIES OF THE COMPANY, EXCEPT AS REQUIRED BY LAW.

2. PURPOSE OF BUSINESS:
THE PURPOSE OF THE LLC IS TO ENGAGE IN AI-POWERED BOOKKEEPING, FINANCIAL REPORTING, AND RELATED BUSINESS SERVICES, AND TO CONDUCT ANY OTHER LAWFUL BUSINESS ACTIVITIES PERMITTED UNDER THE LAWS OF THE STATE OF RHODE ISLAND.

3. INDEMNIFICATION:
THE LLC SHALL INDEMNIFY AND HOLD HARMLESS ITS MEMBERS, MANAGERS, AND EMPLOYEES AGAINST ALL LIABILITIES, COSTS, AND EXPENSES INCURRED IN THE COURSE OF CONDUCTING BUSINESS, EXCEPT IN CASES OF FRAUD OR WILLFUL MISCONDUCT.

4. MANAGEMENT STRUCTURE:
THE LLC SHALL BE MANAGED BY ITS SOLE MEMBER UNLESS OTHERWISE AGREED UPON IN A WRITTEN OPERATING AGREEMENT.

5. CONTINUITY OF BUSINESS:
IN THE EVENT OF THE DEATH, DISABILITY, OR WITHDRAWAL OF THE SOLE MEMBER,
THE LLC MAY CONTINUE OPERATIONS AS OUTLINED IN ITS OPERATING AGREEMENT OR DISSOLVE PER APPLICABLE STATE LAW.

ARTICLE VII

The limited liability company is to be managed by its X Members* or Managers (check one)

*** If you checked to be managed by your MEMBERS (the owners) DO NOT complete the following section. Only complete the following section if you checked to be managed by MANAGERS.**

The name and address of each manager:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
-------	--	--

ARTICLE VIII

The date these Articles of Organization are to become effective, not prior to, nor more than 90 days after the filing of these Articles of Organization.

Later Effective Date: 02/10/2025

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 5 Day of February, 2025 at 2:39:54 PM by the Authorized Person.

DANIEL JOHNSON

Address of Authorized Signer:

60 SUFFOLK DRIVE, NORTH KINGSTOWN, RI 02852

Form No. 400
Revised 09/07

© 2007 - 2025 State of Rhode Island
All Rights Reserved



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:

February 05, 2025 02:36 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

