RI SOS Filing Number: 202577300060 Date: 7/31/2025 10:21:00 AM



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS GGD 32 117

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:	inization are adopted for				
The name of the limited liability company is:	• 18				
Rocky Point Restativant GROUP 11C					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name Chan Ping How Street Address (NOI a P.O. Box)	· · · · · · · · · · · · · · · · · · ·				
Street Address (NOI a P.O. Box)					
253 Bellman Ave					
City/Town Warwica	State RHODE ISLAND	Zip Code			
	l .	02889			
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):					
are written washing company to interiors to be incured to paragraphic interior taxation as (crize to 2 2 2),					
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					
253 Bollman Ave	la	I=:			
City/Town	State RC	Zip Code			
Warwick	KC	02889			
5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence					
until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a more limited purpose or duration is set forth in Section 6 of these Articles of Organization.					
decition of these Articles of Organization.					

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JUL 31 2025 1441.7

BY WOV 5 V

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

6. Additional provisions, if any, not inconsiste of Organization, including, but not limited to, company is formed, and any other provision	any limitation of the p	urpose(s) or d	furation for which the limited liability	
			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 b	OR elow.	Man	ager(s). Complete the chart below.	
	MANAGER(S) NAM	E	ADDRESS	
			<u> </u>	
			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 me	ore than 90 days from	n the date of fi	ling)	
Under penalty of perjury, I declare and affirm accompanying attachments, and that all state	ements contained her			
Name of Authorized Person CHAN PING HOM	Address Be	ll mau	Ave	
City/Town	State		Zip Code	
Warnice	RZ		02889	
Signature of Authorized Person	Hon		Date 2/31/2025	

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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:

July 31, 2025 10:21 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

