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## State of Rhode Island Department of State - Business Services Division

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## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

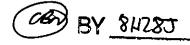
→ Filing Fee: \$150.00

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Pursuant to the provisions of <u>RIGL 7-16</u> , the following Articles of Org the limited liability company to be organized hereby:	anization are adopted for	
The name of the limited liability company is:		21
Ryan Ardito Film LLC	R.J. DE BUS 2025 SEP	
2. The name and address of the initial resident agent/office in Rhod	e Island is:	SV SV -2
Agent Name Ryan J. Ardito		IVEO OF ST OS DIV
Street Address (NOT a P.O. Box) 21 Plymouth Street, Apt 1		59.
City/Town East Greenwich	State RHODE ISLAND	Zip Code 02818
3. Under the terms of these Articles of Organization and any written the limited liability company is intended to be treated for purposes of		
a disregarded as an entity separate from its member (s	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 tim	ne of organization:
Street Address 21 Plymouth Street, Apt 1	•	
City/Town East Greenwich	State Rhode Island	Zip Code 02818
5. The limited liability company has the purpose of engaging in any until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless Section 6 of these Articles of Organization.		

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SEP 02 2025



MAIL TO:

Division of Business Services

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

Phone: (401) 232-3040

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

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 man	aged by its						
You MUST check one box:	· · · · · · · · · · · · · · · · · · ·						
Members (Owners)  OR  DO NOT complete the chart below.  OR  Manager(s). Complete the chart below.							
	MANAGEF	R(S) NAME		ADDRESS			
				·			
			C	Check this box to indicate attachment			
8. Date when these Articles of Organization w	ill be effect	ve: CHECK O	NE BOX (	DNLY			
☑ 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						
Ryan J. Ardito	21 Plymouth Street, Apt 1						
City/Town	State		<del></del>	Zip Code			
East Greenwich	Rho	de Island		02818			
Signature of Authorized Person			• •	Date			
Ryan acto			08/11/2025				

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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:

September 02, 2025 10:59 AM

Gregg M. Amore Secretary of State

Treg M. Coure

