RI SOS Filing Number: 202579668780 Date: 10/15/2025 3:27:00 PM

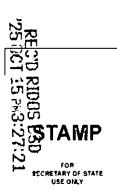


State of Rhode Island Department of State - Business Services Division

Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

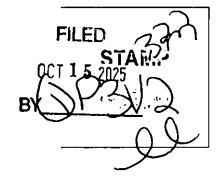


Pursuant to the provisions of <u>RIGL 7-16</u> , the following Articles of Orgathe limited liability company to be organized hereby:	anization are adopted for				
1. The name of the limited liability company is:					
S.G CARPENTRY & LANDSCAPENG L.L.C					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name					
STEVEN L. GARCIA Street Address (NOT a P.O. Box)					
Street Address (NOT a P.O. Box)					
61 BERNON ST		·			
City/Town	State	Zip Code			
Providence	RHODE ISLAND	02908			
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 (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 61 BERNON ST					
City/Town	State	Zip Code			
PROVIDENCE	K.2.	02908			
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.					

MAIL TO:

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

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



				
Additional provisions, if any, not inconsisted of Organization, including, but not limited to,				
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 ma	naged by its:			
You MUST check one box:				
Members (Owners)	OR	Mana	ger(s). Complete the chart below.	
DO NOT 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: CHECK ONE BOX ONLY				
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 accompanying attachments, and that all stat				
Name of Authorized Person	Address			
CHTAGAS I / AO (TA	1-7 0=0 ···	, ST		
STEVEN L. GARCIA City/Town	61 BERNON	/ ST	Zip Code	
			· ·	
PROVIDENCE	RI.		02908	
Signature of Authorized Person			Date	
In long			15 OCT 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:

October 15, 2025 03:27 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

