RI SOS Filing Number: 202083138290 Date: 12/31/2020 1:05:00 PM



Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

RECEIVED
R.I. DEPT. OF STATETAKEP
BUS SVCS DIV

2020 DEC 31 P 1: 05:

Pursuant to the provisions of RIGL $7-16$, the following Articles of Orgathe limited liability company to be organized hereby:	nization are adopted for				
1. The name of the limited liability company is:					
SENE LOGISTICS LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name SOKHNA MOREAU					
Street Address (NOI a P.O. Box) 352 Smith Field AVE					
PAWTUCKET	State RHODE ISLAND	Zip Code 02.860			
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):					
partnership or					
a corporation or					
disregarded as an entity separate from its member(s)					
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:					
Street Address 352 SMITHFIELD AVE					
City/Town PAWTUCKET	State RT	Zip Code 02860			
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 DEC 31 2020 BY WW X6B6A

of Organization, including, l	but not limited to, any limita	v, which the member(s) elect that ation of the purpose(s) or during ay be included in an operating	to have set forth in these Articles ation for which the limited liability g agreement:
**			ck this box to indicate attachment
7. The Limited Liability Con	npany is to be managed by	<i>r</i> .	
		o to Section 8. Do not fill out	
One (1) or more mana of Organization, state t	ager(s) (If the limited liability the name and address of ea	y company has manager(s) a ach manager below.)	t the time of the filing of these Articles
MANAGER	ADDRESS		
8. Date when these Articles	of Organization will be effe	ective: CHECK ONE BOX OF	NLY
Date received (Upon fi	_,		-
Later effective date (Da	ate must be no more than §	90 days from the date of filing	3) Sanuary 1 ^N 2021
		ve examined these Articles of ontained herein are true and o	
Name of Authorized Person		Address	-
SOKHNA	Moreay	352 Smith	rfield ave
City/Town		State	Zip Code
PAWTUCK E		RI	02860
Signature of Authorized Person			Date
5	okha M	neau	31-12-20

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I, NELLIE M. GORBEA, 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:

December 31, 2020 01:05 PM

Nellie M. Gorbea Secretary of State

Tulli U. Horler

