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Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16</u>, the following Articles of Organization are adopted for the limited liability company to be organized hereby:

R.I. DEPT. OF STATE BUS SYCS DIV

the limited liability company to be organized hereby:		l			
1. The name of the limited liability company is:					
Flips Painting and Power Washing LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name Robert W Filipkowski Jr					
Street Address (<u>NOT</u> a P.O. Box) 20 Bowen Briggs Ave					
City/Town Warwick	State RHODE ISLAND	Zip Code 02886			
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 20 Bowen Briggs Ave					
City/Town Warwick	State RI	Zip Code 02886			
5. The limited liability company has the purpose of engaging in any launtil dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a 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

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FORM 400 - Revised: 08/2020

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6. Additional provisions, if any, not consistent 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:						
Perpetual Painting Contractor in accordance with all Rhode island laws						
				·		
Check this box to indicate attachment						
7. The Limited Liability Company	is to be managed by:			·		
You MUST check one box:						
Its member(s) (If you have c	hecked this box, skip to	o Section 8	. Do not fill out the char	t below.)		
One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of these Articles						
of Organization, state the name and address of each manager below.)						
MANAGER	ADDRESS					
		•				
<u> </u>						
	_					
			-			
8. Date when these Articles of Organization will be effective: CHECK ONE BOY ONLY						
8. Date when these Articles of Organization will be effective: CHECK ONE BOX ONLY						
Date received (Upon filing)						
7-1-2022						
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						
		• •				
Robert W Filipkowski Jr 20 Bowen Briggs Ave						
City/Town	<u>↓</u>	State		Zip Code		
Warwick,		RI		02886		
WILL WICK,				0.000		
Signature of Authorized Person				Date		
$\rho_1, \sigma_2, \sigma_3$				6-13-2022		
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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:

June 15, 2022 01:45 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

