This legal document should be typed. All illegible documents will be REJECTED.

# Instructions for Filing Articles of Organization for a Domestic L3C Limited Liability Company

Section 7-16-76 of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

All filings are public records under RIGL 38-2-1, et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

#### How to complete the form:

A low-profit limited liability company shall at all times significantly further the accomplishments of one or more charitable or educational purposes within the meaning of Section 170(c)(2)(B) of the Internal Revenue Code of 1986, 26 U.S.C. section 170(c)(2)(B), or its successor, and would not have been formed but for the entity's relationship to the accomplishment of charitable or educational purposes.

- 1. State the name of the limited liability company. Your entity name must be distinguishable from any name on file in this office. The name must include "low-profit limited liability company," or the letters "L3C" with or without punctuation. You may check name availability on our website; however, this does not ensure the name will still be available upon filing.
- 2. State the name of the resident agent. The resident agent is an individual or entity that will accept all legal service for this entity. The agent must be a Rhode Island resident or entity qualified to do business in this state. A Rhode Island street address is required, **NOT** a P.O. Box. In addition to all legal service of process, other important correspondence from the state will be sent to this address.
- Choose whether your company will be treated as disregarded as an entity separate from its member (single member LLC), a partnership or a corporation for federal income tax purposes. For more information about these distinctions, visit the IRS website.
- 4. Provide the principal address of the limited liability company. If you do not know the address yet, state "not vet determined."
- 5. All Rhode Island limited liability companies have a perpetual (ongoing) existence until the LLC is formally dissolved with this office. All LLCs are organized to conduct any lawful business unless a more specific purpose or duration is stated in Section 6. By completing and submitting these Articles of Organization, the entity agrees to conform to the legal obligations of the entity as indicated in RIGL <u>7-16-76</u>.
- 6. State any additional provisions agreed upon by the members that you would like to include in the Articles of Organization. This is optional.

- Check the box to indicate how the limited liability company will be managed. If you check the first box to indicate that the LLC will be managed by its members, **DO NOT** fill out the chart. If you check the second box to indicate that the LLC will be managed by one or more managers, list their names and respective addresses if known. A "Manager" or "Managers" means a person or persons designated by the members of an LLC to manage the limited liability company. A "Member" means a person with an ownership interest in an LLC with the rights and obligations specified in RIGL 7-16.
- Check "Date received" unless you prefer that the Articles go into effect at a later date than when the form is received in this office. Any later date must be within 90 days of filing.
- An Authorized Person MUST sign and date the form. An Authorized Person is any person designated by the members, shareholders or administrative body of the entity to sign official documents on its behalf.



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# Instructions for Filing (continued) Articles of Organization for a Domestic L3C Limited Liability Company

Section 7-16-76 of the General Laws of Rhode Island, 1956, as amended.

#### How to pay the filing fee:

The filing fee is payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

### How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will NOT result in a mailed confirmation. Filings that cannot be processed will be posted online and then returned. To confirm your submission and obtain evidence of your filing:

- · Go to our Corporate Database.
- Enter the name or ID number of your entity and click "Search."
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing."
- Identify the desired type of filing and click on "PDF" under "View PDF" to view and print the record.

#### How to maintain your status:

The entity is responsible for filing an annual report each calendar year, excluding the year of incorporation, between February 1 and May 1. A courtesy reminder will be mailed to the registered agent prior to February 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office will result in revocation proceedings.

Every entity registered with the RI Department of State - Business Services Division will have filing requirements with the Rhode Island Division of Taxation, even if no business is conducted within Rhode Island for a particular year. Your business may require additional licensing. Please visit our website for further information.

Pursuant to the provisions of RIGL 7-16-76, the following Articles of Organization are adopted for

# **Articles of Organization**

DOMESTIC L3C Limited Liability Company

→ Filing Fee: \$150.00



FOR SECRETARY OF STAT USE ONLY

| the limited liability company to be organized hereby:   |                    |          |  |  |  |
|---|--------------------|----------|--|--|--|
| 1. The name of the limited liability company is:  |                    |          |  |  |  |
| 2. The name and address of the initial resident agent/office in Rhode Island is:  |                    |          |  |  |  |
| Agent Name  |                    |          |  |  |  |
| Street Address ( <u>NOT</u> a P.O. Box)   |                    |          |  |  |  |
| City/Town   | State RHODE ISLAND | Zip Code |  |  |  |
| 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  |                    |          |  |  |  |
| City/Town   | State              | Zip Code |  |  |  |

5. The limited liability company has the purpose of engaging in any lawful business, subject to the statutory provisions stated herein, 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 paragraph 6 of these Articles of Organization. No significant purpose of the entity is the production of income or the appreciation of property; provided, however, that the fact that an entity produces significant income or capital appreciation shall not, in the absence of other factors, be conclusive evidence of a significant purpose involving the production of income or the appreciation of property. No purpose of the entity is to accomplish one or more political or legislative purposes within the meaning of Section 170(c)(2)(D) of the Internal

**MAIL TO:** 

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

Revenue Code of 1986, 26 U.S.C. Section 170(c)(2)(D), or its successor.

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

FOR SECRETARY OF STATE

| 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 ma  | naged   | by its:            |          |                                       |  |  |
| You MUST check one box:   |   |                    |          |                                       |  |  |
| Members (Owners) <b>DO NOT</b> complete the chart belo  | OR Manager(s). Complete the chart below. low. |                    |          |                                       |  |  |
|   | MANA  | AGER(S) NAME       |          | ADDRESS                               |  |  |
|   |   |                    |          |                                       |  |  |
|   |   |                    | С        | heck this box to indicate attachment  |  |  |
| 8. Date when these Articles of Organization   | will be                                       | effective: CHECK O | NE BOX C | 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   | Addre   | ess                |          |                                       |  |  |
| City/Town   |   | State              |          | Zip Code                              |  |  |
| Signature of Authorized Person  |   |                    |          | Date                                  |  |  |

# **Filer Contact Information**

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. All fields are REQUIRED.

| Name:                 |        | Date:         |
|-----------------------|--------|---------------|
| Proposed Entity Name: |        |               |
| Street Address:       |        |               |
| City:                 | State: | Zip Code:     |
| O.l.y.                |        | Zip dodd:     |
| Email Address:        |        | Phone Number: |
|                       |        |               |

**Formation**