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

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

[Section 7-16-12](#) 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.*

**Limited Liability Companies that, in separate filings, have amended sections of the original Articles of Organization can use the Restated Articles to restate the entire Articles of Organization so that there is only one document to reference in the future.**

### How to complete the form:

1. List the entity's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#).
2. List the name of the limited liability company. The entity name can be verified through our [Corporate Database](#).
3. If applicable, briefly describe the amendment(s) to the Articles of Organization. If there are no amendments, check the box to indicate no amendments.
4. You **MUST** create and attach Restated Articles of Organization that correctly set forth without change the corresponding provisions of the Articles of Organization, as previously amended. The Restated Articles of Organization, together with the designated amendments, if any, supersede the original Articles of Organization.
5. The entity has paid all fees and taxes.
6. Check "Date received" unless you prefer that the Restated 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.
7. An Authorized Person **MUST** sign and date the form.

### 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.

Your entity may also be required to report (and update, if necessary) information about the business and its beneficial owners to the U.S. Department of Treasury's Financial Crimes Enforcement Network (FinCEN). Visit [FinCEN.gov/boi](#) for more information.



### Restated Articles of Organization

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

STAMP

FOR  
SECRETARY OF STATE  
USE ONLY

Pursuant to the provisions of RIGL [7-16-12](#), the undersigned limited liability company executes the following Restated Articles of Organization for the purpose of restating its Articles of Organization, as amended, in a single instrument



1. Entity ID Number:	2. The name of the limited liability company is:
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3. Briefly describe the amendment(s), if applicable:

Check the box to indicate an attachment

Check the box to indicate no amendments

4. The attached Restated Articles of Organization correctly set forth without change the corresponding provisions of the Articles of Organization, as previously amended. The Restated Articles of Organization, together with the designated amendments, if any, supersede the original Articles of Organization.

5. As required by RIGL [7-16-8](#), the entity has paid all fees and taxes.



STAMP

FOR  
SECRETARY OF STATE  
USE ONLY

**MAIL TO:**  
**Division of Business Services**  
148 W. River Street, Providence, Rhode Island 02904-2615  
**Phone:** (401) 222-3040  
**Website:** [www.sos.ri.gov](http://www.sos.ri.gov)

6. Date when these Restated 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 that I have examined these Restated Articles of Organization, including any accompanying attachments, and that all statements contained herein are true and correct.*

Name of Authorized Person		Street Address	
City/Town		State	Zip Code
Signature of Authorized Person			Date

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



## 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:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: