



FORM **502**

**ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY**

Sec. 183.0202 Wis. Stats.

Executed by the undersigned for the purpose of forming a Wisconsin limited liability company under Ch. 183 of the Wisconsin Statutes.

Article 1. Name of the limited liability company:

Capital One Bank Corp

Article 2. The limited liability company is organized under Ch. 183 of the Wisconsin Statutes.

Article 3. Name of the initial registered agent:

Corporate Creations Network Inc.

Article 4. Street address of the initial registered office:
(The complete physical address, including street and number, if assigned, and ZIP code. A PO Box, in the same city or town, may be included as part of the address, but is insufficient alone.)

Madison

Article 5. Management of the limited liability company shall be vested in:
(Select and check (X) the one appropriate choice below)

☐ a manager or managers

OR

☐ its members

Article 6. Name and complete address of each organizer:

Ramesh Kadam

Organizer's signature

Organizer's signature

This document was drafted by _____
(Name the individual who drafted the document)

► OPTIONAL – This document has a **delayed** effective date: _____
(up to 90 days **after received date**)

NOTE: The articles of organization may contain **only** that information required under items 1 through 6. The company may create a separate operating agreement that includes additional information.

Office Use Only

ARTICLES OF ORGANIZATION - Limited Liability Company

▲ **Please provide an email or postal mailing address for the filed copy of the document.**

Your ~~phone number~~ ^{(388) 383-8388} during the day: _____

INSTRUCTIONS (Ref. sec. 183.0202 Wis. Stats. for document content)

Please use BLACK ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, **with the \$170.00 filing fee**, payable to the department. Filing fee is **non-refundable**. (If sent by Express or Priority U.S. mail, please visit www.wdfi.org/contact_us/ for current physical address). This document can be made available in alternate formats upon request to qualifying individuals with disabilities. The original must include an original manual signature. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 711 for TTY.

Article 1. The name must contain the words “limited liability company” or “limited liability co.” or end with the abbreviation “L.L.C.” or “LLC”.

Article 2. This statement is required by sec. 183.0202(1).

Articles 3 & 4. The company must have a registered agent located at a registered office in Wisconsin. The address of the registered office is to describe the physical location where the registered agent maintains their business office. Provide the street number and name, city and ZIP code in Wisconsin. P O Box addresses may be included as part of the address, but are insufficient alone. The company may not name itself as its own registered agent.

Article 5. Indicate whether management of the company will be vested in a manager or managers, or in its members. Select only one choice. (Ref. sec. 183.0401, Wis. Stats.)

Article 6. Print or typewrite the name and complete address of each organizer. At least one organizer is required to sign the document, although all organizers may sign.

If the document is executed in Wisconsin, sec. 182.01(3), Wis. Stats., provides that it shall not be filed unless the name of the drafter (either an individual or a governmental agency) is printed in a legible manner. If the document is not executed in Wisconsin, enter that remark.

This document may declare a delayed effective date. To do so, complete the statement. The delayed effective date may not be before, or more than 90 days after, the document is received by the Department of Financial Institutions for filing.