Filing Fee: \$150.00

ID	Number:	



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

T 16

LIMITED LIABILITY COMPANY

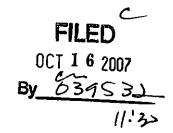
ARTICLES OF ORGANIZATION

Pursuant to the provisions of Chapter 7-16 of the General Laws of Rhode Island, 1956, as amended, the following Articles of Organization are adopted for the limited liability company to be organized hereby:

The address of the limited liability company's resident a	gent in Rhode Island is:	
2 Sweet Hill Drive	Cumberland	RI 02864
(Street Address not P.O. Box)	(City:Town)	(Zip Code)
and the name of the resident agent at such address is	Tara Capuano	
and the neme of the rooteom agent at seon addition to	(Name of	Agent)
	r purposes of federal income t ne box only)	axation as:
(Check or	ne box only)	axation as: entity separate from its membe
(Check or	ne box only) or disregarded as an	entity separate from its membe

until dissolved or terminated in accordance with Chapter 7-16, unless a more limited purpose or duration is set forth in paragraph 6 of these Articles of Organization.

Form No. 400 Revised: 09/06



-		
-		
7.	Management of the Limited Liability Comp	pany:
	A. The limited liability company is to be r no. 8.)	managed 🚺 by its members. (If you have checked this box, go to ite
		<u>or</u>
		be managed by one (1) or more managers. (If the limited liable me of the filing of these Articles of Organization, state the name a
	<u>Manager</u>	<u>Address</u>
8.	The date these Articles of Organization a	re to become effective, if later than the date of filing, is:
8.		
8.		than 30 days after, the filing of these Articles of Organization)
8.		
8.		han 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person:
8.		than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: Tara Capuano
8.		than 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: Tara Capuano 2 Sweet Hill Drive
8.		han 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: Tara Capuano 2 Sweet Hill Drive Cumberland, RI 02864 Under penalty of perjury, I declare and affirm that I hexamined these Articles of Organization, including accompanying attachments, and that all statements contains



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

