ID Number: ____ Filing Fee: \$150.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION

The name of the limited liability company is:		
ANNMAR HOLDING, LLC		
The address of the limited liability company's resid	ent agent in Rhode Island is:	
29 Post Road, 2nd Floor	Westerly	, RI 02891
(Street Address, not P.O. Box)	(City/Town)	(Zip Code)
and the name of the resident agent at such addres	R. Paul Kuhn	
and the name of the resident agent at such address	(Name	of Agent)
Under the terms of these Articles of Organization a the limited liability company is intended to be treated (Che		
the limited liability company is intended to be treated	ed for purposes of federal incomeck one box only)	
the limited liability company is intended to be treated (Che	ed for purposes of federal income ck one box only) n or disregarded as a	e taxation as: in entity separate from its member

Form No. 400 Revised: 09/06

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Ma	nagement of the Limited Liability Company:			
A.	The limited liability company is to be ma	anaged very by its members. (If you have checked this box, go to item		
		<u>or</u>		
В.	The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)			
	<u>Manager</u>	Address		
		<u> </u>		
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	e date these Articles of Organization are	to become effective, if later than the date of filing, is:		
Γh∈	5	to be series and an action than the date of limity, is.		
Γh∈				
Γh∈	(not prior to, nor more than	n 30 days after, the filing of these Articles of Organization)		
Γh€	(not prior to, nor more than			
Γh€	(not prior to, nor more than	n 30 days after, the filing of these Articles of Organization) Name and Address of Authorized Person: R. Paul Kuhn		
Γh€ 	(not prior to, nor more than	Name and Address of Authorized Person:		
	(not prior to, nor more than	Name and Address of Authorized Person: R. Paul Kuhn		
The	(not prior to, nor more than	Name and Address of Authorized Person: R. Paul Kuhn 29 Post Road, 2nd Floor Westerly, RI 02891		
The	(not prior to, nor more than	Name and Address of Authorized Person: R. Paul Kuhn 29 Post Road, 2nd Floor Westerly, RI 02891 Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any		
The	(not prior to, nor more than	Name and Address of Authorized Person: R. Paul Kuhn 29 Post Road, 2nd Floor Westerly, RI 02891 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		
The	(not prior to, nor more than	Name and Address of Authorized Person: R. Paul Kuhn 29 Post Road, 2nd Floor Westerly, RI 02891 Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any		
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	(not prior to, nor more than	Name and Address of Authorized Person: R. Paul Kuhn 29 Post Road, 2nd Floor Westerly, RI 02891 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		



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

