

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

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

Allpro Parking, LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of New York

4. The date of its organization is March 1, 2000

5. The period of duration of the limited liability company is (if perpetual, so state) until December 31, 2035

6. The address of the limited liability company's resident agent in Rhode Island is:

222 Jefferson Blvd., Suite 200 Warwick, RI 02888
(Street Address, not P.O. Box) (City/Town) (Zip Code)

and the name of the resident agent at such address is National Registered Agents, Inc.
(Name of Agent)

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SECRETARY OF STATE
CORPORATIONS DIV
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7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:

465 Main Street, Buffalo, New York 14203

9. The mailing address for the limited liability company is:

465 Main Street, Buffalo, New York 14203

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By [Signature] 1936

10. Management of the Limited Liability Company:

A. The limited liability company is to be managed by its members. *(If you have checked this box, go to item no. 11.)*

or

B. 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>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

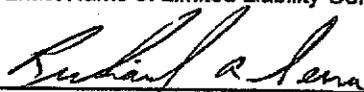
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: June 19, 2008

Allpro Parking, LLC

Print Exact Name of Limited Liability Company Making Application

By



Signature of authorized person

Richard A. Serra, Member

State of New York
Department of State } ss:

I hereby certify, that CIM PARK, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/01/2000, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A certificate changing name to PRO PARK, LLC was filed on 03/09/2000.

An Affidavit of Publication of PRO PARK, LLC was filed on 07/31/2000.

An Affidavit of Publication of PRO PARK, LLC was filed on 07/31/2000.

A Biennial Statement was filed 03/08/2002.

A Biennial Statement was filed 03/04/2004.

A certificate changing name to ALLPRO PARKING, LLC was filed on 02/07/2006.

A Biennial Statement was filed 03/13/2006.

A Biennial Statement was filed 04/17/2008.

I further certify, that no other documents have been filed by such Limited Liability Company.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 18th day of June two
thousand and eight.*



Special Deputy Secretary of State



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

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 handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

Secretary of State

