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

ARTICLES OF ORGANIZATION

	The name of the limited liability company is:					
	870 DOUGLAS LLC					
	The address of the limited liability company's resident agent in Rhode Island is:					
	222 Jefferson Boulevard, 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	Corporation Service Company				
	and the name of the resident again at such address to	(Name of Agent)				
	a partnership <u>or</u> a corporation <u>o</u>	ne box only) o <u>r</u> ✓ disregarded as an e	entity sepa	arate from its member		
	The address of the principal office of the limited liability					
	870 Douglas Avenue					
	Providence,RI,02908					
	(If not determine	d, so state)				
	The limited liability company has the purpose of engag until dissolved or terminated in accordance with Chapte paragraph 6 of these Articles of Organization.		ourpose o			
		ED		P		
		FILEV		N		

Form No. 400 Revised: 09/06

Organizati	on, including, but not limite	sistent with law, which the members elect to have set forth in these Articles of d to, any limitation of the purposes or duration for which the limited liability vision which may be included in an operating agreement:			
					
. Managem	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. 8.)				
		<u>or</u>			
comp	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>			
. The date t	hese Articles of Organization	are to become effective, if later than the date of filing, is:			
Upon Filin					
	(not prior to, nor mor	e than 30 days after, the filing of these Articles of Organization)			
		Name and Address of Authorized Person:			
		Corporation Service Company			
		2711 Centerville Road, Suite 400			
		Wilmington, DE 19808			
		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 herein are true and correct. Corporation Service Company Organizer			
		Corporation Service Company Organizer			
Date: 01/05/2	009				
		Signature of Authorized Person			

Tierra Torres, Asst. Sec.