Filing Fee: \$150.00 ID Number: _____



1. The name of the limited liability company is:

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

FILED

FEB 23 2009

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:

765	5 Worden's Pond Road	South Kingstown	, RI	02879
	(Street Address, <u>not</u> P.O. Box)	(City/Town)		(Zip Code)
and	and the name of the resident agent at such address is	Laura L. Winward		
		(Name of	Agent)	
Under the terms of these Articles of Organization and any written operating agreement made or intended the limited liability company is intended to be treated for purposes of federal income taxation as:			intended to be made	
	(Check or	ne box only)		
[a partnership <u>or</u> a corporation <u>o</u>	or disregarded as an e	entity sepa	arate from its member
	address of the principal office of the limited liability Worden's Pond Road South Kingstown, RI 02		the time o	of organization:
	(If not determine	d, so state)		

5000 LEB 53 VW 8:58

Form No. 400 Revised: 09/06 UE VELVEZA E-STATE DRINGATE TOO VIO EPONANCIANO



6.	Additional provisions, if any, not inconsistent with law, which the members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or duration for which the limited liability company is formed, and any other provision which may be included in an operating agreement:					
	none at this time					
	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>				
	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>				
8.	The date these Articles of Organization are upon filing	to become effective, if later than the date of filing, is:				
		n 30 days after, the filing of these Articles of Organization)				
		Name and Address of Authorized Person: Laura L. Winward				
		765 Worden's Pond Road				
		South Kingstown, RI 02879				
		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.				
Dat	e: <u>2/20/09</u>	Signature of Authorized Person				
		JAMAN STATE OF THE				



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

