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# 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**

fore	rsuant to the provisions of Section 7-16-49 of the Gene eign limited liability company hereby applies for a Certifi and, and for that purpose submits the following statement	cate of Registration to tra	, l956, as amended, the undersigned nsact business in the state of Rhode		
1.	The name of the limited liability company is:  Mangunaro Northeast, UC				
<ol> <li>The name, if different, under which it proposes to register and transact business in Rhode Island is:</li> </ol>					
3. 4.	The limited liability company is organized under the law  The date of its organization is 3/1/2003	us of Massachus	etts		
5.	The period of duration of the limited liability company is	i (if perpetual, so state) 🔟	Perpetual		
6.	The address of the limited liability company's resident a		•		
	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		ne of Agent)		
7.	The secretary of state is appointed the agent of the follower time there is no resident agent or if the resident agent of diligence.	oreign limited liability com cannot be found or served	pany for service of process if at any following the exercise of reasonable		
8.	The address of any office required to be maintained limited liability company is organized is:  52 Cummings Park	in the state or other juris			
9.	The mailing address for the limited liability company is:  52 Cummings Park				
	Woburn, MA 018Q1:01HV L-	A9A 600S	FILED		
-	m No. 450	A SECRET	APR 07 2009 By 97277		

10. Management of the Limited Liability C		ompany:	
A. The limited liability company is to be m     no. 11.)		anaged  by its members. (If you have checked this box, go to item	
		<u>or</u>	
B. The limited liability company is to be company has managers at the time address of each manager.)		e managed by one (1) or more managers. (If the limited liability e of the filing of these Articles of Organization, state the name and	
	<u>Manager</u>	<u>Address</u>	
_			
_			
_			
11. Th au	nis application is accompanied by a certi thorized officer of the jurisdiction under	ficate of good standing duly authenticated by the secretary of state or other 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	3/30/09	Manyanire Northrist, LLC Print Exact Name of Limited Liability Company Making Application	
	,	Print Exact Name of Limited Liability Company Making Application	
		Ву	
		Signature of authorized person	
		David Mangarras	



# The Commonwealth of Massachusetts Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

### March 4, 2009

### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

# MANGANARO NORTHEAST, LLC

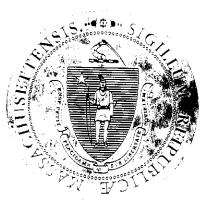
in accordance with the provisions of Massachusetts General Laws Chapter 156C on February 27, 2003.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; that said Limited Liability Company has not been administratively dissolved; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **DAVID MANGANARO** 

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **DAVID MANGANARO** 

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **DAVID MANGANARO** 



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travers Islein



# 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

