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:				
Deerfield Development, LLC				
The address of the limited liability company's resident agent in Rhode Island is:				
1055 OAKLAWN AVENUE	CRANSTON	, RI	02920	
(Street Address, not P.O. Box)	(City/Town)	<del></del> -	(Zip Code)	
and the name of the resident agent at such address is	ANTHONY M. CAPRIO			
and the name of the resident agent at such address is	(Name of	Agent)		
• • •	purposes of federal income t ne box only)	axation as		
• • •	ne box only)			
(Check or	ne box only) or disregarded as an	entity sepa	arate from its member	
(Check or a partnership $\underline{or}$ a corporation $\underline{o}$ The address of the principal office of the limited liability of	ne box only)  or disregarded as an ecompany if it is determined at	entity sepa	s: arate from its member	

Form No. 400 Revised: 09/06

6.	Additional provisions, if any, not inconsistent with law, which the members elect to have set forth in these Articles o 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:				
7.	Management of the Limited Liability Company:				
	A. The limited liability company is to be managed very 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 to	o become effective, if later than the date of filing, is:			
	(not prior to, nor more than	30 days after, the filing of these Articles of Organization)			
		Name and Address of Authorized Person: ANTHONY M. CAPRIO			
		1055 OAKLAWN AVENUE			
		CRANSTON, RI 02920			
		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	te: 06/17/2009	Signature of Authorized Person			



## 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

