

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

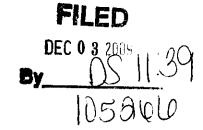
Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION

1.	The name of the limited liability company is:					
	Blais Family Investments, LLC			<u> </u>		
2.	The address of the limited liability company's resident agent in Rhode Island is:					
	5 Benefit St.	Providence	, RI	02904		
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)		
	and the name of the resident agent at such address is	Richard H. Gregory III				
		(Name of	Agent)			
3.	Under the terms of these Articles of Organization and an the limited liability company is intended to be treated for	y written operating agreemer purposes of federal income to	it made o exation as	r intended to be	. ,	
	(Check on	e box only)				
	\checkmark a partnership \underline{or} a corporation \underline{or}	disregarded as an e	ntity sepa	ယ် arate from its me	mber	
4.	The address of the principal office of the limited liability of Not yet determined	company if it is determined at	the time o	of organization:	*. * <u>*</u>	
		d no stata)				
	(If not determined	i, so state)				

Form No. 400 Revised: 09/06



(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				
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7. N	Management of the Limited Liability Company:				
ļ	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>			
E		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>			
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	The date these Articles of Organization are December 31, 2009	to become effective, if later than the date of filling, is:			
-	(not prior to, nor more the	an 30 days after, the filing of these Articles of Organization)			
		Name and Address of Authorized Person: Patricia C. Blais			
		36 Grants Mill Road			
		Cumberland, RI 02864			
		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			
	1 1	herein are true and correct.			
Date	11/24/09	P. R.			

Signature of Authorized Person



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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

