Filing Fee: \$150.00	ID Number:
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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 LIABI	LITY COMPANY	,	
	ARTICLES OF	ORGANIZATION		
Pu of	ursuant to the provisions of Chapter 7-16 of the General La Organization are adopted for the limited liability company to	ws of Rhode Island, 1956 o be organized hereby:	, as amended, th	e following Articles
1.	The name of the limited liability company is:			
	Pro Lab Installations LLC			
2.	The address of the limited liability company's resident age	ent in Rhode Island is:		
	40 Walter Carey Road	Smithfield	, RI	02917
	(Street Address, <u>not</u> P.O. Box)	(City/Town)		(Zip Code)
	and the name of the resident agent at such address is _	James P. Ro	bshaw of Agent)	
3.	Under the terms of these Articles of Organization and any the limited liability company is intended to be treated for pro-	written operating agreem urposes of federal income	ent made or inte taxation as:	nded to be made,
	(Check one	box only)		
	a partnership $\underline{or}$ $\boxed{\mathbf{x}}$ a corporation $\underline{or}$	disregarded as ar	n entity separate	from its member
4.	The address of the principal office of the limited liability con	mpany if it is determined a	at the time of org	anization:
	40 Walter Carey Road, Smithfiel	•	3	
	(If not determined,	so state)		
	The limited liability company has the purpose of engaging until dissolved or terminated in accordance with Chapter 7-paragraph 6 of these Articles of Organization.	in any lawful business, a -16, unless a more limited	nd shall have pe I purpose or dura	rpetual existence ition is set forth in
	001 - 1 bll 3: 16	1-02	FILE	

Form No. 400 Revised: 09/06

C	ompany is formed, and any other provis	ion which may be included in an operating agreement:
_		
_		
_		
'. M	anagement of the Limited Liability Comp	pany:
Δ	The limited liability company is to be a	nanaged x by its members. (If you have checked this box, go to ite
Δ.	no. 8.)	ilanaged [] by its members. (If you have checked this box, go to ite
		<u>or</u>
B.		e managed by one (1) or more managers. (If the limited liabilities of the filing of these Articles of Organization, state the name at
	• ,	Address
	<u>Manager</u>	<u>Address</u>
	- Cappan	
-	A #	
-		
The	e date these Articles of Organization are	to become effective, if later than the date of filling, is:
	October 1, 2010	
	(not prior to, nor more tha	n 30 days after, the filing of these Articles of Organization)
		Name and Address of Authorized Person:
		James P. Robshaw
		40 Walter Carey Road
		Smithfield, RI 02917
		Omitenización (A. 02517
		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.
:e:	10-1-10	accompanying attachments, and that all statements contained