Filing Fee: \$150.00



Form No. 450 Revised: 07/12

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, I956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability	company is:						
	SIGN SYSTEM SOLUTIONS, LLC							
	This company has been duly o	rganized in its state of formation as	a low-profit limited liabili	ity company. (Check box if a	pplicabl	le)		
2.	The name, if different, under w	hich it proposes to register a	nd transact busines	ss in Rhode Island is:	2013	33 33 33 33 34		
3.	The limited liability company is	organized under the laws of	MASSACHUSETT	'S	Jul-	770 T		
4.	The date of its organization is	12/06/2004			<u>.</u>	当學		
5.	The period of duration of the lin	nited liability company is (if p	erpetual, so state)	PERPETUAL	PH 12:	S:40		
6.	The address of the limited liabi	lity company's resident agen	t in Rhode Island is	sce attacker		NA NA		
	10 Dorrance Street, Suite 530		Providence	, RI <u>0290</u>	3			
	(Street Address, n	ot P.O. Box)	(City/Tow	n)	(Zip C	ode)		
	and the name of the resident a	gent at such address is CT	Corporation Systen	n Name of Agent)				
7.	The secretary of state is appo time there is no resident agent diligence.							
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:							
	7 SADIE LANE, HOPKINTON, MA 01748-2582							
9.	The mailing address for the lim	ited liability company is:						
	7 SADIE LANE, HOPKINTON, MA	01748-2582						

FILED 1232,
JUL 0 1 2013

BY 02 700707

10		Management of the Limited Liability C	ompany:			
	Α.	A. The limited liability company is to be managed by its members. (If you have checked this box, go to item no. 11.)				
		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 an address of each manager.)				
	В.					
		<u>Manager</u>	Address			
	_					
11.			ificate of good standing duly authenticated by the secretary of state or other which the foreign limited liability company was organized.			
12.	The date this Application for Registration is to become effective, if later than the date of filling, is:					
	(not prior to, nor more than 30 days after, the filing of this Application for Registration)					
			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.			
Dat	e: _	6/27/13	SIGN SYSTEM SOLUTIONS, LLC Print Exact Name of Limited Liability Company Making Application			
			By Authorized Person			

Effective 06/17/2013 the Rhode Island offices of

CT Corporation System
Business Filings International, Inc.
National Registered Agents, Inc.
CorpDirect Agents, Inc.

moved to

450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

April 17, 2013

TO WHOM IT MAY CONCERN:

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

SIGN SYSTEM SOLUTIONS, LLC

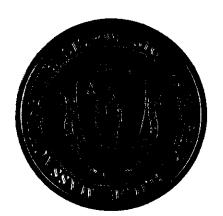
in accordance with the provisions of Massachusetts General Laws Chapter 156C on **December 6, 2004.**

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; 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: **RICHARD J. CAMERON**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: RICHARD J. CAMERON, JEFFREY E. SMART

The names of all persons authorized to act with respect to real property listed in the most recent filing are: RICHARD J. CAMERON, JEFFREY E. SMART



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 Travino Galicin