Filing Fee: \$150.00



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

4 JAN 23 AM 10

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:			
	SSB_LLC This company has been duly organized in its state of formation	and a low profit limited tiability company	(Chack hav	if applicable)
2.	The name, if different, under which it proposes to registe SSB Real Estate		•	,
3.	The limited liability company is organized under the law	s of Connecticut		
4.	The date of its organization is 8/22/2013			
5.	The period of duration of the limited liability company is	(if perpetual, so state) Perpe	tual	····
6.	The address of the limited liability company's resident a	gent in Rhode Island is:		
	7780 Post Road	North Kingston	. RI	02852
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)
	and the name of the resident agent at such address is _	All Star LLC (Name of Ag	gent)	·····
7.	The secretary of state is appointed the agent of the fo time there is no resident agent or if the resident agent of diligence.	reign limited liability company trannot be found or served follow	for service ving the exe	of process if at any ercise of reasonable
В.	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:			
	7780 Post Road			
	North Kingston, RI 02852			
Э.	The mailing address for the limited liability company is:			
	242 Loper Street			
	Southington, CT 06489	FILE	D	
		JAN 23	2014	
OU	n No. 450		,	

Form No. 450 Revised: 07/12 By 49-215410 A.A. 10:50A.m.

10.	Management of the Limited Liab	ility Company (check <u>one</u> only):			
A.	The limited liability company is to No. 11 – DO <u>NOT</u> LIST ANY NA	be managed XX by its members. (If you have checked this box, go to item AMES IN SECTION B.)			
	<u>or</u>				
В.	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>			
_					
_					
а	authorized officer of the jurisdiction	a certificate of good standing duly authenticated by the secretary of state or othe under which the foreign limited liability company was organized. ation is to become effective, if later than the date of filing, is:			
	(not prior to, nor more than 30 days after, the filing of this Application for Registration)				
	(in production of the producti				
		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:	1/5/2014	SSB LLC Print Exact Name of Limited Liability Company Making Application			
		By Signature of Authorized Person			

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

SSB LLC

a domestic limited liability company, were filed in this office on August 22, 2013.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Semi Whenk

Date Issued: January 03, 2014

2014 JAN 23 AM 10: 50

SECRETARY OF STATE SCORPORATIONS DIV

Business ID: 1115754 Express Certificate Number: 2014001975001