ID Number: \_\_\_\_ Filing Fee: \$150.00



## 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

## **APPLICATION FOR REGISTRATION**

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned

	reign limited liability company hereby applies for a Certifica and, and for that purpose submits the following statement:		ransact busines	s in the state of Rhode	
1.	The name of the limited liability company is:				
	72 ECM, LLC				
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:				
3.	The limited liability company is organized under the laws of Delaware				
4.	The date of its organization is September 16, 2015				
5.	The period of duration of the limited liability company is (if perpetual, so state) Perpetual				
6.					
	450 Veterans Memorial Parkway, Suite 7A	East Providence	RI	02914	
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)	
	and the name of the resident agent at such address is _	National Registered Agents, Inc.			
		(Name of Agent)			
7.	The secretary of state is appointed the agent of the fore time there is no resident agent or if the resident agent ca diligence.				
8.	The address of any office required to be maintained in limited liability company is organized is:	the state or other jur	isdiction under	the laws of which the	
	National Registered Agents, Inc., 160 Greentree Drive,	, Suite 101, Dover, De	laware 19904		
9.	The mailing address for the limited liability company is:		10.	20 AM	
			FILE	D	
	7600 Red Road, Suite 102, Miami, FL 33143		NOV 16	2015	
		В	v 2611	54	
	m No. 450 rised: 12/05	_		Ku	

Form No. 450 Revised: 12/05

10.	Management of the Limited Liability C	Company:	
A.	The limited liability company is to be no. 11.)	managed by its members. (If you have checked this box, go to item	
<u>or</u>			
В.	B. The limited liability company is to be managed volume by one (1) or more managers. (If the limited company has managers at the time of the filing of these Articles of Organization, state the na address of each manager.)		
	<u>Manager</u>	<u>Address</u>	
M	arket Street Real Estate Partners,	7600 Red Road, Suite 102, Miami, FL 33143	
LI	LC		
_			
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		tificate of good standing duly authenticated by the secretary of state or other which the foreign limited liability company was organized.	
		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:	Nov 3 2015	72 ECM, LLC	
		Print Exact Name of Limited Liability Company Making Application	
		By Signature of authorized person	

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "72 ECM, LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE SECOND DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "72 ECM, LLC" WAS FORMED ON THE SIXTEENTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 10344490

Date: 11-02-15