

Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

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SECRETARY OF STATE
CORPORATIONS DIV
2016 APR 15 AM 9:26

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 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:

- The name of the limited liability company is:
SRC Operations, LLC
- The name, if different, under which it proposes to register and transact business in Rhode Island is:
n/a
- The limited liability company is organized under the laws of the Commonwealth of Massachusetts
- The date of its organization is March 9, 2016
- The period of duration of the limited liability company is (if perpetual, so state) perpetual
- The address of the limited liability company's resident agent in Rhode Island is:
450 Veterans Memorial Parkway, Ste. 7A E. Providence, RI 02914
(Street Address, not P.O. Box) (City/Town) (Zip Code)
and the name of the resident agent at such address is CT Corporation System
(Name of Agent)
- The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.
- 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:
63 Kendrick St, Needham MA 02494
- The mailing address for the limited liability company is:
63 Kendrick St, Needham MA 02494

FILED

9:26

APR 15 2016

By 272384

10. Management of the Limited Liability Company:

A. The limited liability company is to be managed by its members. *(If you have checked this box, go to item no. 11.)*

or

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 and address of each manager.)*

<u>Manager</u>	<u>Address</u>
<u>Scott Schuster</u>	<u>63 Kendrick Street, Needham, MA 02494</u>
<u>Tamilyn M. Levin</u>	<u>63 Kendrick Street, Needham, MA 02494</u>
<u>Michael S. Benjamin</u>	<u>63 Kendrick Street, Needham, MA 02494</u>
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11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

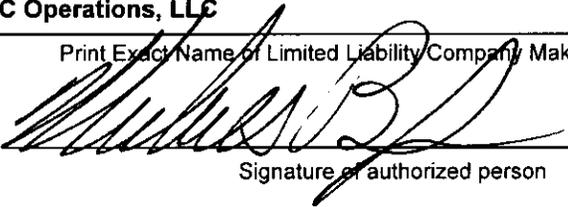
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: April 13, 2016

SRC Operations, LLC

Print Exact Name of Limited Liability Company Making Application

By


Signature of authorized person



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

William Francis Galvin
Secretary of the
Commonwealth

April 1, 2016

TO WHOM IT MAY CONCERN:

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

SRC OPERATIONS, LLC

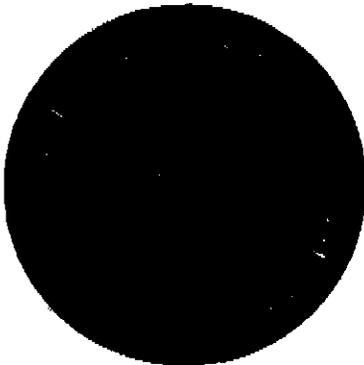
in accordance with the provisions of Massachusetts General Laws Chapter 156C on **March 9, 2016.**

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: **SCOTT SCHUSTER, MICHAEL S. BENJAMIN, TAMILYN M. LEVIN**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **SCOTT SCHUSTER, MICHAEL S. BENJAMIN, TAMILYN M. LEVIN**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **SCOTT SCHUSTER, MICHAEL S. BENJAMIN, TAMILYN M. LEVIN**



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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 handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

