



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No 72631		2. Exact name of the limited liability company HOLLY BROOK LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island PURCHASE, SALES & DEVELOPMENT OF REAL ESTATE	
5. Principal office address 139 Willow Ave		City Little Compton	State RI
			Zip 02837
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas R Chace		Contact Title Member / Manager	
Street Address 139 Willow Ave		City Little Compton	State RI
			Zip 02837
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name THOMAS R. CHACE		Address	
Address 139 WILLOW AVENUE		City LITTLE COMPTON	Zip 02837

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



File Date 11/22 *72631*

Check No. 1004

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statement contained herein are true and correct.

[Signature] 9/27/05
Signature of Authorized Person Date

Thomas R Chace
Print or Type Name of Authorized Person



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 72631		2. Exact name of the limited liability company HOLLY BROOK LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island PURCHASE, SALES & DEVELOPMENT OF REAL ESTATE	
5. Principal office address 139 Willow Ave		City Little Compton	State RI
		Zip 02837	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas R. Chace		Contact Title Manager	
Street Address 139 Willow Ave		City Little Compton	State RI
		Zip 02837	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name THOMAS R. CHACE		Address	
Address 139 WILLOW AVENUE		City LITTLE COMPTON	Zip 02837

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



* 7 2 6 3 1 *

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

File Date 10/15/04
 Check No. 1123
 By TS
 FOR SECRETARY OF STATE USE ONLY

Thomas R. Chace 10/14/04
 Signature of Authorized Person Date
Thomas R. Chace
 Print or Type Name of Authorized Person



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

2003

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 72631		2. Exact name of the limited liability company HOLLY BROOK LLC	
3. State of Formation Rhode Island		4. Brief description of the character of the business which is actually conducted in Rhode Island Purchase, Sales, and Development of Real Estate	
5. Principal office address 139 Willow Ave		City Little Compton	State RI
		Zip 02837	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas R Chace		Contact Title Manager	
Street Address 139 Willow Ave		City Little Compton	State RI
		Zip 02837	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. FILL IN SPACES BEFORE USING ATTACHMENTS. 11" X 17" BOX FOR ATTACHMENT. ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (a) (2) / 7-16-52			
Manager Name Thomas Chace		Manager Name No Changes	
Street Address 139 Willow Ave		Street Address	
City Little Compton	State RI	City	State
Zip 02837		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name Thomas Chace		Address	
Address 139 Willow Ave		City Little Compton, RI	Zip 02837

This report must be signed in ink by an authorized person pursuant to 7-16-66.

File Date	RECEIVED
Check No.	APR 06 2004
By:	<i>[Signature]</i>
FOR SECRETARY OF STATE USE ONLY	

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

[Signature] 9/9/03
Signature of Authorized Person Date
Thomas R Chace
Print or Type Name of Authorized Person



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 72631		2. Exact name of the limited liability company HOLLY BROOK LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island PURCHASE, SALES & DEVELOPMENT OF REAL ESTATE	
5. Principal office address 139 Willow Ave.		City Little Compton	State RI
		Zip 02837	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Thomas R Chace		Contact Title Member / MANAGER	
Street Address 139 Willow Ave		City Little Compton	State RI
		Zip 02837	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52			
Manager Name Donna Robinson Deborah Thomas		Manager Name Thomas Chace	
Street Address 249 Rte 102 Oppen St		Street Address 139 Willow Ave	
City Providence Beaumont	State RI	City Little Compton	State RI
Zip 02909		Zip 02837	
Street Address		Street Address	
City	State	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name THOMAS R. CHACE		Address	
Address 139 WILLOW AVENUE		City LITTLE COMPTON	Zip 02837

This report must be signed in ink by an authorized person pursuant to 7-16-66.



* 7 2 6 3 1 *

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

Thomas R Chace 9/3/02
Signature of Authorized Person Date
Thomas R Chace
Print or Type Name of Authorized Person

File Date	9-5-02
Check No.	1115
By:	TC
FOR SECRETARY OF STATE USE ONLY	

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 72631

Annual Report for the year 2001

1. The name of the limited liability company is:

HOLLY BROOK LLC

2. The address of the principal office of the limited liability company is:

139 Willow Ave. Little Compton RI 02837

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: THOMAS R. CHACE

139 WILLOW AVENUE LITTLE COMPTON RI 02837

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Thomas Chace

139 Willow Ave. Little Compton RI 02837

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Purchase/Sale of Real Estate / Development of Real Estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address
_____	_____
_____	_____
_____	_____

Dated 10/22/01

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



Holly Brook LLC
Exact Name of Limited Liability Company

FOR SECRETARY OF STATE USE ONLY
 File Date: 11-14-01
 Check No.: 1111
 By: [Signature]

By Thomas R. Chace
Thomas R. Chace - ~~Gen~~ Member
Title

Form No. 632
Revised 01/99

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 72631

Annual Report for the year 2000

1. The name of the limited liability company is:

HOLLY BROOK LLC

2. The address of the principal office of the limited liability company is:

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: THOMAS R. CHACE

139 WILLOW AVENUE LITTLE COMPTON RI 02837

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Tom Chace

139 Willow Ave., L.C., R.I. 02837

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate Development

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Thomas Chace

139 Willow Ave., L.C., R.I. 02837

Martine Thomas

302 Cypress Trace, Royal Palm Beach, FL 33411

Susan Hutcherson

same address

Dated 9/20/2000

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

Holly Brook LLC

Exact Name of Limited Liability Company

By Tom Chace (Thomas R. Chace)

Manager / Operations Manager

Title



7 2 6 3 1

FOR SECRETARY OF STATE USE ONLY
File Date: <u>9/21</u>
Check No.: <u>1007</u>
By: <u>AC</u>

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number LL 72631

Annual Report for the year 1999

1. The name of the limited liability company is:

HOLLY BROOK LLC

2. The address of the principal office of the limited liability company is:

139 Willow Ave., Little Compton, RI 02837

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: THOMAS R. CHACE

139 WILLOW AVENUE LITTLE COMPTON, RI 02837

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Thomas R. Chace

139 Willow Ave., Little Compton, RI

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Real Estate Development.

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name
Thomas Chace
Matthew J.B. Thomas
c/o Susan J. Hutcheon

Address
139 Willow Ave., Little Compton RI 02837
302 Cypress Trace, Royal Palm Beach, Fla.
33441

Dated 10/16/99

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



Holly Brook LLC
Exact Name of Limited Liability Company

By Thomas Chace
Member / Operations Manager / Partner
Title

FOR SECRETARY OF STATE USE ONLY
File Date: 10-18-99
Check No.: 1056
By: AMF

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number LL 72631

Annual Report for the year 1998

1. The name of the limited liability company is:

HOLLY BROOK LLC

2. The address of the principal office of the limited liability company is:

139 Willow Ave., Little Compton, RI 02837

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: THOMAS R. CHACE

139 WILLOW AVENUE LITTLE COMPTON, RI 02837

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Thomas R. Chace

139 Willow Ave., Little Compton, RI 02837

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: buying and selling real estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address
<u>Thomas R Chace</u>	<u>139 Willow Ave., Little Compton RI 02837</u>
<u>MARtha IB Thomas</u>	<u>302 Cypress Trace Royal Palm Beach, FL. 33441</u>

Dated 8/31, 19 98

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



Holly Brook LLC
Exact Name of Limited Liability Company

By Thomas R Chace
Member
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>9.2.98</u>
Check No.:	<u>988</u>
By:	<u>100</u>

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

ID Number 0072631

Annual Report for the year 1997

1. The name of the limited liability company is:

HOLLY BROOK LLC

2. The address of the principal office of the limited liability company is:

139 Willow Ave., Little Compton, RI 02837

3. The state or other jurisdiction under the laws of which it is formed is: Rhode Island

4. The name and address of its resident agent is: Thomas R Chace

139 Willow Ave., Little Compton, RI 02837

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Thomas R Chace

139 Willow Ave., Little Compton, RI 02837

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Purchase & Sales of Real Estate / Real Estate Development

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Martha JB Thomas
c/o Susan J. Hutcheon

302 Cypress Tracc, Royal Palm Beach
Florida 33441

Thomas R Chace

139 Willow Ave., Little Compton, RI 02837

Dated 9/15, 19 97

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

PAID

SEP 22 1997
110 922
SECY OF STATE

Holly Brook LLC

Exact Name of Limited Liability Company

By [Signature]

Member / Operations Manager & Partner
Title

Form No LLC-19
Revised 8-97

THOMAS R. CHACE

139 WILLOW AVENUE
LITTLE COMPTON RI 02837

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1

State of Rhode Island and Providence Plantations
Office of the Secretary of State
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D.# 72631

Annual Report for the year 1996

FIRST: The name of the limited liability company is: **HOLLY BROOK LLC**

SECOND: The address of the principal office of the limited liability company is:

Holly Brook LLC, 139 Willow Ave., Little Compton, RI, 02837

THIRD: The state or other jurisdiction under the laws of which it is formed is: **Rhode Island**

FOURTH: The name and address of its resident agent is:

Thomas R. Chace, 139 Willow Ave., Little Compton, RI, 02837

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

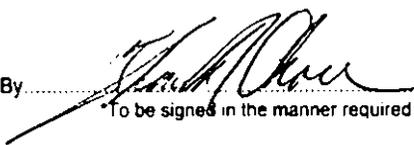
Thomas R. Chace, 139 Willow Ave., Little Compton, RI, 02837

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:

Real Estate Development

Dated *9/30*, 19 *96*, *Holly Brook LLC*
Exact Name of Limited Liability Company

File Date:	<u>10/2</u>
Check No:	<u>823</u>
By:	<u>TCAD</u>
For Secretary of State Use Only	

*By 
To be signed in the manner required by the home state.
Title *Operations Manager - General Partner*

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1

State of Rhode Island and Providence Plantations
Office of the Secretary of State
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D. # 0072651

Annual Report for the year 1995

FIRST: The name of the limited liability company is:

HOLLY BROOK LLC

SECOND: The address of the principal office of the limited liability company is:

139 Willow Ave.
Little Compton, RI, 02837

THIRD: The state or other jurisdiction under the laws of which it is formed is:

Rhode Island

FOURTH: The name and address of its resident agent is:

Thomas R. Chace
139 Willow Ave., Little Compton, RI, 02837

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

Thomas R. Chace
139 Willow Ave., Little Compton, RI, 02837

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:

Purchase & Sales of Real Estate
Real Estate Development

Dated August 31, 1995

Holly Brook LLC
Exact Name of Limited Liability Company

FILED

OCT 02 1995

By ce LSD

*By Thomas R. Chace
Title Member / Operations Manager
Partner

*To be signed in the manner required by the home state.

FORM LLC-19 7/95

THOMAS R. CHACE
139 WILLOW AVENUE
LITTLE COMPTON RI 02837

Filing Fee \$50.00
Payable to
Secretary of State

PLEASE TYPE OR PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept 1 - Nov 1
CORP Jan 1 - March 1

Corporate ID 72631 Annual Report for the year 1994

Name of Business Entity Holly Brook LLC

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number _____

For foreign entity, address and telephone number of principal office: _____

Phone: _____

Address and telephone of the principal office of business entity in Rhode Island (Provide street address. Not P.O. Box).

139 Willow Avenue

Little Compton, RI 02837

Phone: (617) 635-2176

Business Entity is (check one)

- Business Corporation (See RIGL Chapter 7-1)
- Professional Service Corporation (See RIGL Chapter 7-5.1)
- Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Thomas R. Chace, Operations Manager

139 Willow Avenue

Little Compton, RI 02837

Brief statement of the character of business conducted in Rhode Island
Real estate development

Date of Organization May 20, 1993

Date of Qualification to do business in Rhode Island (if foreign entity) _____

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	TITLE	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input type="checkbox"/> RESIDENT AGENT	Thomas R. Chace	Operations Manager	139 Willow Avenue	Little Compton, RI	02837
<input checked="" type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input type="checkbox"/> VICE PRESIDENT (ONLY FOR CORPORATIONS)	George R. Thomas	Finance Manager	258 Brayton Point Road	Westport, MA	
<input type="checkbox"/> CUSTODIAN OR REGISTRAR <input type="checkbox"/> SECRETARY (ONLY FOR CORPORATIONS)	Martha B. Thomas	Coordinating Manager	258 Brayton Point Road	Westport, MA	
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input type="checkbox"/> TREASURER (ONLY FOR CORPORATIONS)					

MEMBERS:

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Thomas R. Chace	139 Willow Avenue	Little Compton, RI	02837
George R. Thomas	258 Brayton Point Road	Westport, MA	
Martha B. Thomas	258 Brayton Point Road	Westport, MA	

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER	NUMBER
CLASS N/A	CLASS N/A
SERIES	SERIES
PAR VALUE OR WITHOUT PAR	PAR VALUE OR WITHOUT PAR

Date 8/29 19 94

FILED
SEP 2 1994
139 Willow Ave CRK 440

By _____

Thomas R. Chace

PRINT OR TYPE NAME OF OFFICER SIGNING

Operations Mgr.
TITLE OF OFFICER SIGNING

Form 154

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

Thomas R. Chace
139 Willow Avenue
Little Compton, RI 02837

Filing Fee \$50.00

STATUTORY REQUIREMENT: NO FEE

LLC ID. # 72631

To be filed annually between
September 1 and November 1

State of Rhode Island and Providence Plantations
Corporations Division
100 North Main Street
Providence, Rhode Island 02903

Annual Report for the Year 1993 (STATUTORY REQUIREMENT : 1993 LLC'S)

FIRST: The name and address of the principal office of the limited liability company is:

HOLLY BROOK LLC
139 Willow Ave.
Little Compton, RI. 02837

SECOND: It is formed under the laws of the state of Rhode Island

THIRD: Name and address of its resident agent is: Thomas R. Chace
139 Willow Ave.
Little compton, RI. 02837

FOURTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Thomas R. Chace
139 Willow Ave., Little Compton, RI. 02837
Thomas R Chace - Manager of Operations / Partner

FIFTH: A brief statement of the character of the business in which the limited liability company is actually engaged in Rhode Island. Purchase and sale of Real Estate
Real Estate Development

Dated October 5, 1993 HOLLY BROOK LLC
(Name of Limited Liability Company)

* By *Thomas R Chace*
Title *Manager of Operations / Partner*

* To be signed in the manner required by the home state.

Rec'd & Filed OCT 06 1993