

Filing Fee: \$100.00

ID Number: 124840



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 PARTNERSHIP

CERTIFICATE OF LIMITED PARTNERSHIP
(To Be Filed In Duplicate Original)

The undersigned, desiring to form a limited partnership under and by virtue of the powers conferred by Section 7-13-8 of the General Laws, 1956, as amended, do execute the following Certificate of Limited Partnership:

1. The name of the limited partnership shall be:

97 White Rock, LP

(The name must contain the words "limited partnership" or the letters and punctuation "L.P.")

2. The address of the specified office in this state where the records of the limited partnership shall be kept is:

20 Westminster Street

Providence, RI 02903

3. The name and address of the specified agent for service of process is Robert D. Wieck

(Name of Agent)

107 Dyer Street

(Street Address, not P.O. Box)

Providence

(City/Town)

, RI

02903

(Zip Code)

4. The name and business address of each general partner is:

General Partner

Business Address

911 Porsche Corp.

20 Westminster Street

Providence, RI 02903

5. The mailing address for the limited partnership is 20 Westminster Street

(Street Address)

Providence

(City/Town)

RI

(State)

02903

(Zip Code)

FILED

MAY 21 2002

By AMF
284081

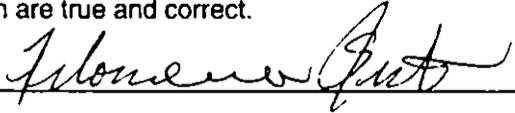
6. Any other matters the partners determine to include herein:

December 31, 2102

(If additional space is required, please list on separate attachment.)

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Limited Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: May 21, 2002

By 

By Filomena Sisto

By President

By 911 Porsche Corp.

By _____

By _____

Signature(s) of all general partners named herein