Filing Fee: \$100.00

ID Number: ASD 5/



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

CERTIFICATE OF LIMITED PARTNERSHIP

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:

	The name of the limited partnership shall be:				
	Elmwood Neighborhood Revitalization Limited Partnership				
	(The name must contain the words "limited partnership" or the letters and punctuation "l.p." or "L.P.")				
•	The address of the specified office in this state where the records of the limited partnership shall be kept is:				
	One Trinity Square, Providence, RI 02907				
•				<u> </u>	
•	The name and address of the specified agent for service of process is HASLAW, LLC Attention: Secretary			ion: Secretary	
			(Name of	Agent)	
_	1500 Fleet Center	Pro	ovidence	. RI 02903	
	(Street Address, not P.O. Box)		(City/Town)	(Zip Co	
-	The name and business address of each general partner is:				
	·				
	General Partner		Business Addres	s ·	
_	ENR, Inc.	One Trinity So	quare, Providence, Ri	02907	
(Cushing Construction Management Co., Inc. 59 Temple Place, Boston, Massachusetts 02111				
-					
_					
T	he mailing address for the limited partnership is	One Trinity Squ	ia ro		
		one manty aqual		(Street Address)	
	Providence	RI	0	2907	
_	(City/Town)	(State)		(Zip Code)	
Α	NOV Other matters the nartners determine to include	thoroin #			
•	Any other matters the partners determine to include therein (If additional space is required, please list on separate attachment.)				
			- Same Mills		
_	TE' Mit 30 UI	7	1-11	LED	
_					
_		90/H00	DEC	1 2 1997	

Statements contained herein are true and correct.

ENR, inc.

By:

Title: PRE51DENT

Cushing Construction Management Co., Inc.

By:

(Signature(s) of all general partners named herein)

(Signature(s) of all general partners named herein)

Dated _

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Limited Partnership and that all