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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 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:			<i>a</i>	
	Walnut Hill Apartments, L.P. The name must contain the words Thesis.	ed partnership" or the letters and punctual	Va. 21 (2.2)		
2.	The address of the specified office in this state where		·	pt is:	
	85 Douglas Pike, Smithfield, Rhode Is	sland 02917	 _		
3.	The name and address of the specified agent for ser		Leary, Esq Name of Agent)		
	\$70 Westminster Street (Street Address, not P.O. Box)	Providence (City/Town)	, RI02	903 (Zip Code)	
↓ .	The name and business address of each general par	tner is:			
	General Partner	Business Address			
	Ferland Corporation	85 Douglas Pike			
		Smithfield, Rhode Is	land 02917		
					
					
			<u> </u>		
	The mailing address for the limited partnership is	85 Douglas Pike			
-		(Street Address)			
	Smithfield	Rhode Island		02917	
	(City/Town)	(State)		(Zip Code)	

Form No. 300 Revised: 01/99 FILED
JUN 27 2001
By 266263

shall operate under the provisions of its Limited					
Partnership Agreement and the provisions of Title 7, Chapter 13 of the					
General Laws of the State of Rhode Island					
(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					
Ferland Corporation					
Arm AO hear					
Roll 1					
James A. O'Leary					
xxx Assistant Secretary					
Ву					