Filing Fee: \$100.00

ID Number: 103150



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:

| Road, Cumberland, and address of the specif Row, Suite 300 (Street Address, not and business address of General Partner | Rhode Island ied agent for sen | 02864 vice of process | is Drew P. Kaplan (Name of Ag Providence (City/Town) | gent) |
|--|--------------------------------|---|---|---|
| Row, Suite 300 (Street Address, note and business address of General Partner | ied agent for sen | vice of process | (Name of Ag | , RI <u></u> 3 |
| Row, Suite 300 (Street Address, note and business address of 6 | P.O. Box) | · | (Name of Ag | , RI <u></u> 3 |
| (Street Address, <u>not</u> and business address of o General Partner | , | tner is: | | |
| (Street Address, <u>not</u> and business address of o General Partner | , | tner is: | | |
| General Partner | each general par | tner is: | | |
| | | | | |
| Di | | | Business Address | |
| eet Phase III Devel | opment Corpo | ration 1 | Mendon Road, Cumberl | and RI 02864 |
| g address for the limited p | partnership is | 1 Mendon Ro | | |
| umberland | 73. 1 | | · | |
| (City/Town) | | | | 2864 Zip Code) |
| | mine to include t | therein (If addition | eal space is required, please list on | separate attachment.) |
| | Cumberland (City/Town) | (City/Town) matters the partners determine to include | Cumberland Rhode Island (City/Town) (State) matters the partners determine to include therein (If addition | (Street Address) Sumberland Rhode Island 0 (City/Town) (State) (If additional space is required, please list on |

REDEIVED

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

| / N/ / | | enda | ' IN |
|--------|--------------|------|----------|
| / | | | |
| | - | | <u>.</u> |

, 19<u>98</u> December Dated

FILED

DEC 08 1998

MAIN STREET PHASE III DEVELOPMENT CORPORATION 1 Mendon Road Cumberland, Rhode Island 02864

December **2**, 1998

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

Re: Main Street Phase III Limited Partnership

Dear Sir or Madam:

The undersigned hereby consents to the filing of a Certificate of Limited Partnership by the above-captioned limited partnership under the name Main Street Phase III Limited Partnership.

Very truly yours,

MAIN STREET PHASE III
DEVELOPMENT CORPORATION

FILED

DEC 08 1998

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SECHETARY OF STATE
SECHETARY OF STATE