Filing Fee: \$100.00

1D Number: <u>107390</u>



## 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:

1.					
	The Edward G. Hail Family Limited Partnership				
	(The name must contain the words "timited partnership" or the letters and punctuation "I.p." or "L.P.")				
2.	The address of the specified office in this state where the records of the limited partnership shall be kept is:				
	1420 BankBoston Plaza, Providence, RI	02903			
3.	The name and address of the specified agent for service of process is Andrew H. Davis, Jr., Esq. (Name of Agent)				
	1420 BankBoston Plaza	Pro	ovidence	02903 RI	
	(Street Address, <u>not</u> P.O. Box)		(City/Town)	(Zip Code)	
4.	The name and business address of each general partner is:				
	General Partner	Business Address			
	Edward G. Hail	220 Rumstick Road, Barrington RI 02806			
	`				
				·	
				<del> </del>	
5.	The mailing address for the limited partnership is 220 Rumstick Road (Street Address)				
	Barrington RI		02806		
	(Crty/Town)	(State)	(Zip Co	de)	
6.	Any other matters the partners determine to include therein (If additional space is required, please list on separate attachment)				
	As set forth in the Agreement of Limited Partnership.				
	ru EN				
	PILE-				
			JUL 1 2 1999		
			Du (CAIR)		

	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.
	Edward G. Hail
Dated <u>June 20</u> 19 99	(Signature(s) of all general partners named herein)