



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$500.00

Secretary of the Commonwealth, Corporations Division
 One Ashburton Place, 17th floor
 Boston, MA 02108-1512
 Telephone: (617) 727-9640

Certificate of Organization

(General Laws, Chapter)

Identification Number: 001270708

1. The exact name of the limited liability company is: ABBYVILLE DEVELOPMENT, LLC

2a. Location of its principal office:

No. and Street: 850 FRANKLIN ST., SUITE 8
 City or Town: WRENTHAM State: MA Zip: 02093 Country: USA

2b. Street address of the office in the Commonwealth at which the records will be maintained:

No. and Street: 850 FRANKLIN ST., SUITE 8
 City or Town: WRENTHAM State: MA Zip: 02093 Country: USA

3. The general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:

THE GENERAL CHARACTER OF THE BUSINESS OF THE COMPANY IS TO ENGAGE IN THE ACQUISITION AND OWNERSHIP OF REAL PROPERTY, TO PURCHASE, ACQUIRE, BUY, SELL, OWN, HOLD, DEVELOP, LEASE, MANAGE, FINANCE, SUBDIVIDE AND OTHERWISE DEAL WITH REAL ESTATE AND INTERESTS IN REAL OR PERSONAL PROPERTY AND IMPROVEMENTS THEREON, AND TO DO ANY AND ALL THINGS NECESSARY, CONVENIENT, OR INCIDENTAL TO THAT PURPOSE, INCLUDING THE BORROWING OF FUNDS AND GRANTING OF COLLATERAL SECURITY FOR BORROWING; TO ENGAGE IN ANY LAWFUL ACTIVITIES DIRECTLY OR INDIRECTLY RELATED OR INCIDENTAL TO ANY OF THE FOREGOING; AND TO ENGAGE IN ANY OTHER ACTIVITY IN WHICH A LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE COMMONWEALTH OF MASSACHUSETTS MAY LAWFULLY ENGAGE.

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: THOMAS W. DIPLACIDO, JR.
 No. and Street: 850 FRANKLIN ST., SUITE 8
 City or Town: WRENTHAM State: MA Zip: 02093 Country: USA

I, THOMAS W. DIPLACIDO, JR. resident agent of the above limited liability company, consent to my appointment as the resident agent of the above limited liability company pursuant to G. L. Chapter 156C Section 12.

6. The name and business address of each manager, if any:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
MANAGER	THOMAS W. DIPLACIDO JR.	850 FRANKLIN ST., SUITE 8 WRENTHAM, MA 02093 USA

7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
SOC SIGNATORY	THOMAS W. DIPLACIDO JR.	850 FRANKLIN ST., SUITE 8 WRENTHAM, MA 02093 USA

8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	THOMAS W. DIPLACIDO JR.	850 FRANKLIN ST., SUITE 8 WRENTHAM, MA 02093 USA

9. Additional matters:

**SIGNED UNDER THE PENALTIES OF PERJURY, this 25 Day of April, 2017,
BRIAN G. VAUGHAN**

(The certificate must be signed by the person forming the LLC.)

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

April 25, 2017 09:18 AM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is written in a cursive style with a large, prominent initial "W".

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth