STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Department of Administration State Properties Committee One Capitol Hill Providence, RI 02908

CERTIFICATION OF DISCLOSURE OF LIMITED LIABILITY COMPANY

The undersigned hereby certifies to the State Properties Committee under oath that _______, LLC is a limited liability company authorized by the Secretary of State to conduct business in Rhode Island and that the following information is true and accurate:

| Business address: | | | |
|-------------------|--|--|--|
| | | | |
| | | | |

| Agent for Service | | |
|-------------------|--------|-----------|
| 8 | (Name) | (Address) |
| Member(s): | | |
| | (Name) | (Address) |
| | (Name) | (Address) |
| | (Name) | (Address) |

The property under consideration for purchase or lease covered by this certificate is identified as:

3 Grassy Plain Road, Barrington, RI

IN WITNESS THEREOF, I hereby set my hand this _____ day of _____, 2020.

(Member)

STATE OF RHODE ISLAND COUNTY OF _____

Signed and sealed before me in the City/Town of ______ on this _____ on this _____ day of ______, 2020.

NOTARY PUBLIC My commission expires:

CERTIFICATE OF AUTHORITY (LIMITED LIABILITY COMPANY)

| I, | ; | certify | that | Ι | am | the |
|-------------------------------------|----------------|--------------|-------------|----------|-----------|--------|
| | of | | | | | , |
| LLC, the limited liability compa | ny described | in and w | hich exe | cuted t | the fore | going |
| instrument with the State of Rh | ode Island; | that said | limited 1 | iability | compa | ny is |
| organized under the laws of the Sta | ate of Rhode | Island; that | the limit | ed liab | ility com | ıpany |
| seal affixed to said instrument i | is the seal of | of said lin | nited liab | ility co | ompany; | ; that |
| | W | ho execu | ited sai | d ins | strument | as |
| | of | said limi | ted liabil | ity cor | npany i | s the |
| | of | said limite | ed liabilit | y comj | pany and | d has |
| been duly authorized to execute | said instrum | nent in be | half of s | aid lin | nited lia | bility |
| company; that I know the signatu | re of said _ | | | , | and that | at the |
| signature affixed to such instrumen | t is genuine. | | | | | |

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the limited liability company seal of said limited liability company, this _____ day of _____2020.

Secretary