# you must a the test mode. To remove this message and watermark, william Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

## Limited Liability Company Certificate of Organization

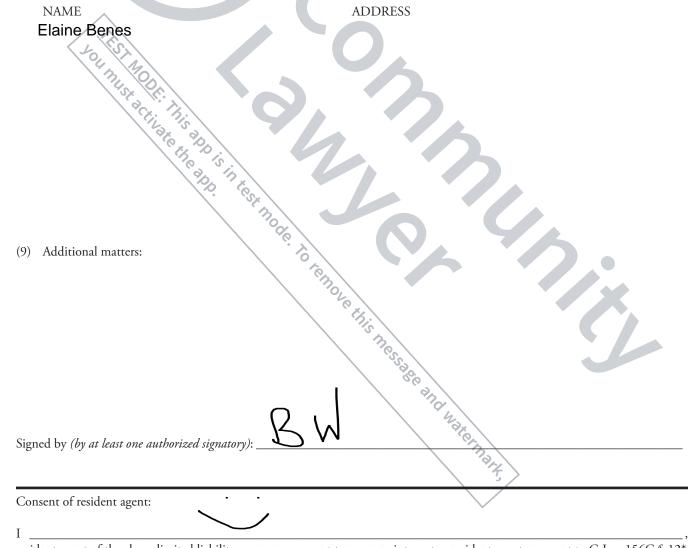
(General Laws Chapter 156C, Section 12)

Federal Identification No.: 123456789			
(1)	The exact name of the limited liability company:  Bryan's LLC		
(2)	The street address of the office in the commonwealth at which its records will be maintained: 123 ABC Street		
(3)	The general character of the business:  Making things		
(4)	Latest date of dissolution, if specified:		
(5)	The name and street address, of the resident agent in the commonwealth:  NAME  George Costanza  ADDRESS  456 Acme Street		
(6)	The name and business address, if different from office location, of each manager, if any:		
	NAME ADDRESS		
	Jerry Seinfeld 789 ten street		

TEST MODE: This app is in test mode. To remove this message and watermark, (7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to Y execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:

NAME ADDRESS

(8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property recorded with a registry of deeds or district office of the land court:



resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to G.L. c 156C  $12^*$ 

<sup>\*</sup>or attach resident agent's consent hereto.

### TEST MODE: This app is in test mode. To remove this message and watermark, you must activate the app.

#### William Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Boston, Massachusetts 02108-1512

#### Limited Liability Company Certificate (General Laws Chapter 156C, Section 12)

I hereby certify that upon examination of this limited liability	
duly submitted to me, it appears that the provisions of the	
thereto have been complied with, and I hereby approve said	* *
filing fee in the amount of \$ having been paid, sa	id application is deemed
to have been filed with me this	,
, 20	, ata.m./p.m
Difference days	
Effective date:	
WHILLIAM EDANICIC CALVE	N T
WILLIAM FRANCIS GALVI  Secretary of the Commonwealth	N
secretary of the Commonwealth	
Filing fee: \$500	
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TO BE FILLED IN DV LIMPTED LIADILY	TYCOMBANIA
Contact Information:	I I COMPANI
Contact information.	
Filing fee: \$500  TO BE FILLED IN BY LIMITED LIABILIT Contact Information:  George Costanza	
170	
123 ABC Street	44
(e <sub>B</sub> )	
George Costanza  123 ABC Street  Telephone:  Email: bgw4g5@gmail.com  Upon filing, a copy of this filing will be available at www.se	
8675309	
Telephone:	
Email: bgw4g5@gmail.com	
Email:	
Upon filing, a copy of this filing will be available at www.se	c.state.ma.us/cor.
If the document is rejected, a copy of the rejection sheet and	
be available in the rejected queue.	YO.