# The Commonwealth of Massachusetts William Francis Galvin

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

## Professional Limited Liability Company Annual Report (General Laws Chapter 156C, Section 12)

Federal Identification No.:	Year:					
(1a) The exact name of the limited liability company:						
(1b) The exact name of the limited liability company as amended:						
(2) The street address of the office in the commonwealth at which	its records will be maintained:					
(3a) The professional service to be rendered:						
(3b) The name and address of each member or manager who will render a professional service in the Commonwealth:						
(3c) The limited liability company agrees that each member or mar licensed to provide the service and to abide by and be subject to an lating board including the provision of liability insurance required	y conditions or limitations established by any applicable regu-					
(4) Latest date of dissolution, if specified:						

(5) The name and street address of the resident agent in the commonwealth:

(6)	) The name and business address of each manager, if any, and if none, so state:					
(7)	The name and business address of the person(s) in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:					
(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.					
(9)	Additional matters:					
Signed by (by at least one authorized signatory):						

### **COMMONWEALTH OF MASSACHUSETTS**

#### William Francis Galvin

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

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I hereby certify that upon examination of th annual report, duly submitted to me, it appe	-		
Laws relative thereto have been complied wi	_		
tion; and the filing fee in the amount of \$ _			
is deemed to have been filed with me this		1	11
day of	, 20	, at	a.m./p.m.
		tin	ne
WILLIAM FRAN		IN	
Secretary of the Co	ommonwealth		
T-1.	***		
Filing fee:	\$500		
TO BE FILLED IN BY LIMITI		ITY CON	<i>M</i> PANY
Contact Info	rmation:		
			<del></del>
Telephone:			

Upon filing, a copy of this filing will be available at www.sec.state.ma.us/cor. If the document is rejected, a copy of the rejection sheet and rejected document will be available in the rejected queue.