



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$100.00

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

Certificate of Amendment

(General Laws, Chapter)

Federal Employer Identification Number: 001101586 (must be 9 digits)

The date of filing of the original certificate of organization: 3/7/2013

1.a. Exact name of the limited liability company: POST OFFICE SQUARE ACTON, LLC

1.b. The exact name of the limited liability company as amended, is: POST OFFICE SQUARE ACTON, LLC

2a. Location of its principal office:

No. and Street: 121 LORING AVENUE
SUITE 342
 City or Town: SALEM State: MA Zip: 01970 Country: USA

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

THE SOLE PURPOSE OF THE LCC IS TO ACQUIRE, DEVELOP, IMPROVE AND MANAGE THE P REMISES KNOWN AS 6 POST OFFICE SQUARE, ACTON, MASSACHUSETTS.

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: PHILIP S. SINGLETON
 No. and Street: 12 CHARING CROSS
 City or Town: LYNNFIELD State: MA Zip: 01940 Country: USA

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	PHILIP S. SINGLETON	121 LORING AVENUE SALEM, MA 01970 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

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	PHILIP S. SINGLETON	121 LORING AVENUE SALEM, MA 01970 USA

9. Additional matters:

10. State the amendments to the certificate:

THE AMENDMENT EFFECTIVE WITH THIS FILING IS TO AMEND THE GENERAL CHARACTER OF THE BUSINESS.

11. The amendment certificate shall be effective when filed unless a later effective date is specified:

**SIGNED UNDER THE PENALTIES OF PERJURY, this 3 Day of February, 2014,
PHILIP S. SINGLETON , Signature of Authorized Signatory.**

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:

February 03, 2014 02:09 PM

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

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth