



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

Annual Report

(General Laws, Chapter)

Identification Number: 001065412

Annual Report Filing Year: 2015

1.a. Exact name of the limited liability company: MAIR AMHERST PROPERTIES, LLC

1.b. The exact name of the limited liability company as amended, is: MAIR AMHERST PROPERTIES, LLC

2a. Location of its principal office:

No. and Street: 31 BALL HILL ROAD
 City or Town: BERLIN State: MA Zip: 01503 Country: USA

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

No. and Street: 31 BALL HILL ROAD
 City or Town: BERLIN State: MA Zip: 01503 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 PURPOSES OF THE LIMITED LIABILITY COMPANY ARE TO ACQUIRE, OWN, HOLD, IMPROVE, MANAGE AND OPERATE CONDOMINIUM UNITS IN AMHERST, MASSACHUSETTS (THE "PROPERTY"); TO INCUR INDEBTEDNESS, SECURED AND UNSECURED; TO MORTGAGE, FINANCE, REFINANCE, ENCUMBER, LEASE, SELL, EXCHANGE, CONVEY, TRANSFER OR OTHERWISE DEAL WITH OR DISPOSE OF THE PROPERTY; TO ENTER INTO AND PERFORM CONTRACTS AND AGREEMENTS OF ANY KIND NECESSARY TO, IN CONNECTION WITH OR INCIDENTAL TO THE BUSINESS OF THE LIMITED LIABILITY COMPANY; TO EXERCISE ALL OTHER POWERS NECESSARY TO OR REASONABLY CONNECTED WITH THE LIMITED LIABILITY COMPANY'S BUSINESS THAT MAY BE LEGALLY EXERCISED BY LIMITED LIABILITY COMPANIES UNDER THE ACT; TO ENGAGE IN ALL ACTIVITIES NECESSARY, CUSTOMARY, CONVENIENT, OR INCIDENTAL TO ANY OF THE FOREGOING AND ANY OTHER LAWFUL ACT OR ACTIVITY FOR WHICH LIMITED LIABILITY COMPANIES MAY BE FORMED UNDER THE ACT; AND TO CARRY ON ANY OTHER ACTIVITIES NECESSARY TO, IN CONNECTION WITH OR INCIDENTAL TO THE FOREGOING, AS THE MANAGER IN HIS DISCRETION MAY DEEM DESIRABLE.

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: GLEN MAIR
 No. and Street: 31 BALL HILL ROAD
 City or Town: BERLIN State: MA Zip: 01503 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	GLEN MAIR	31 BALL HILL ROAD BERLIN, MA 01503 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	GLEN MAIR	31 BALL HILL ROAD BERLIN, MA 01503 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	GLEN MAIR	31 BALL HILL ROAD BERLIN, MA 01503 USA

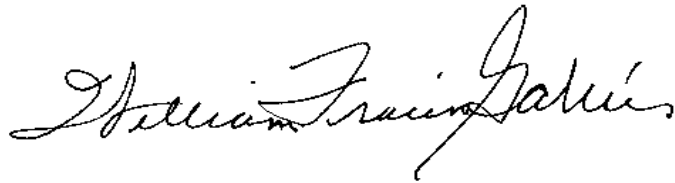
9. Additional matters:

SIGNED UNDER THE PENALTIES OF PERJURY, this 21 Day of February, 2016,
GLEN MAIR , 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 21, 2016 02:31 PM

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

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth