



**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

**Certificate of Organization**

(General Laws, Chapter )

Identification Number: 001579334

1. The exact name of the limited liability company is: ARC LLC

**2a. Location of its principal office:**

No. and Street: 60 HOPE AVENUE  
UNIT 320  
 City or Town: WALTHAM State: MA Zip: 02453 Country: USA

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

No. and Street: 60 HOPE AVENUE  
UNIT 320  
 City or Town: WALTHAM State: MA Zip: 02453 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:**

A) ANY AND ALL PURPOSES THAT MAY LAWFULLY BE CARRIED ON BY LIMITED LIABILITY COMPANY ORGANIZED UNDER CHAPTER 156C OF THE GENERAL LAWS OF THE COMMONWEALTH OF MASSACHUSETTS. B) TO CONDUCT, MANAGE, AND CARRY ON THE BUSINESS OF PURCHASE, DEMOLITION, CONSTRUCTION, RENOVATION AND SALE OF REAL ESTATE.

**4. The latest date of dissolution, if specified:**

**5. Name and address of the Resident Agent:**

Name: POUYA HEZAVEH  
 No. and Street: 60 HOPE AVENUE  
UNIT 320  
 City or Town: WALTHAM State: MA Zip: 02453 Country: USA

I, POUYA HEZAVEH resident agent of the above limited liability company, consent to my appointment as the resident agent of the above limited liability company pursuant to G. L. Chapter 156C Section 12.

**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	POUYA HEZAVEH	60 HOPE AVENUE WALTHAM, MA 02453 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.

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> (no PO Box) Address, City or Town, State, Zip Code
SOC SIGNATORY	DAVID K KERTZMAN ESQ.	40 GROVE STREET WELLESLEY, MA 02482 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:**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	POUYA HEZAVEH	60 HOPE AVENUE WALTHAM, MA 02453 USA

**9. Additional matters:**

**SIGNED UNDER THE PENALTIES OF PERJURY, this 28 Day of April, 2022,**  
**POUYA HEZAVEH**

*(The certificate must be signed by the person forming the LLC.)*

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:

April 28, 2022 10:50 AM

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

WILLIAM FRANCIS GALVIN

*Secretary of the Commonwealth*