

# The Commonwealth of Massachusetts

Examiner

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

## ARTICLES OF ORGANIZATION (General Laws, Chapter 180)

Name  
Approved

### ARTICLE I

The exact name of the corporation is:  
The Villages at Crane Meadow Condominium Association, Inc.

### ARTICLE II

The purpose of the corporation is to engage in the following activities:  
See Page 1A attached hereto and made a part hereof.

C    |  
P    |  
M    |  
R.A. |

99 OCT -7 AM 11:45  
SECRETARY OF  
THE COMMONWEALTH

## **THE VILLAGES AT CRANE MEADOW CONDOMINIUM ASSOCIATION, INC.**

### **PURPOSE**

To manage, maintain, protect and preserve The Villages at Crane Meadow Condominium on Williams Street, Marlborough, Massachusetts, including, without limitation, all improvements thereon and as further set forth in the Master Deed of The Villages at Crane Meadow Condominium to be recorded with the Middlesex South District Registry of Deeds and any duly recorded amendments to and/or modification of said Master Deed to promote health, safety and welfare of its members and, in furtherance of said purposes, to purchase, acquire, hold, improve, sell, rent, mortgage, pledge, assign and other deal in and with any and all property, real, personal or mixed.

To exercise all the rights, powers and privileges and to perform all the duties and obligations of the Association as set forth and undertaken in the aforesaid Master Deed.

To operate and maintain, or provide for the operation and maintenance of, any common areas or facilities held by the Association for the benefit of the members, or any areas concerning which the Association holds easements for the benefit of its members. Such operation and maintenance shall include the employment and dismissal of all necessary personnel; the making of repairs, additions and improvements to, or alterations of, any such areas or facilities, including the maintenance, operation, improvement and alteration of the exterior of the condominium buildings; the purchasing of all necessary supplies; the allocation of expenses to, and billing of, all condominium owners; the preparation of and obtaining of all necessary forms of insurance and similar matters and maintenance of the development.

To promote conservation and other activities for the betterment, health, morals and safety of the members.

No part of the net earnings of the Association shall inure to the benefit of any member, governor, officer of the Association or any private individual or other corporation, except that reasonable compensation may be paid for services rendered to or for the Association affecting one or more of its purposes.

Notwithstanding any other provisions of these articles, the Association shall not conduct or carry on any activities not permitted to be conducted or carried on by an organization, except under Section 528 of the Internal Revenue Code and its regulations as they now exist or as they may hereafter be amended.

### ARTICLE III

Corporation may have one or more classes of members. If it does, the designation of such classes, the manner of election or appointments, the duration of membership and the qualification and rights, including voting rights, of the members of each class, may be set forth in the by-laws of the corporation or may be set forth below:

One class membership only.

### ARTICLE IV

Other lawful provisions, if any, for the conduct and regulation of the business and affairs of the corporation, for its voluntary dissolution, or for limiting, defining, or regulating the powers of the corporation, or of its directors or members, or of any class of members, are as follows:

None

### ARTICLE V

By-laws of the corporation have been duly adopted and the initial directors, president, treasurer and clerk or other presiding, financial or recording officers, whose names are set out on the following page, have been duly elected.

*\*\*If there are no provisions state "None"*

ARTICLE VI

The effective date of organization of the corporation shall be the date approved and filed by the Secretary of the Commonwealth. If a later effective date is desired, specify such date which shall not be more than thirty days after the date of filing.

ARTICLE VII

The information contained in Article VII is not a permanent part of the Articles of Organization.

a. The street address (post office boxes are not acceptable) of the principal office of the corporation in Massachusetts is:

b. The name, residential address and post office address of each director and officer of the corporation is as follows:

	NAME	RESIDENTIAL ADDRESS	POST OFFICE ADDRESS
President:	Jon Mark Delli Priscoli	38 Brigham St. Marlborough,	MA 01752
Treasurer:	David A. Franchi	38 Brigham St. Marlborough,	MA 01752
Clerk:	Guenther Zisler	782 Boston Post RD. Marlborough,	MA 01752
Directors: (or officers having the powers of directors)	Jon Mark Delli Priscoli	38 Brigham St. Marlborough,	MA 01752
	David A. Franchi	38 Brigham St. Marlborough,	MA 01752

c. The fiscal year of the corporation shall end on the last day of the month of:

June 30

d. The name and business address of the resident agent, if any, of the corporation is:

N/A

I/We, the below signed incorporator(s), do hereby certify under the pains and penalties of perjury that I/we have not been convicted of any crimes relating to alcohol or gaming within the past ten years. I/We do hereby further certify that to the best of my/our knowledge the above-named officers have not been similarly convicted. If so convicted, explain.

IN WITNESS WHEREOF AND UNDER THE PAINS AND PENALTIES OF PERJURY, I/we, whose signature(s) appear below as incorporator(s) and whose name(s) and business or residential address(es) are clearly typed or printed beneath each signature, do hereby associate with the intention of forming this corporation under the provisions of General Laws, Chapter 180 and do hereby sign these Articles of Organization as incorporator(s) this 1st day of October, 19 99.

Jon Mark Delli Priscoli 38 Brigham St. Marlborough, MA 01752

David A. Franchi 38 Brigham St. Marlborough, MA 01752

Note: If an existing corporation is acting as incorporator, type in the exact name of the corporation, the state or other jurisdiction where it was incorporated, the name of the person signing on behalf of said corporation and the title he/she holds or other authority by which

THE COMMONWEALTH OF MASSACHUSETTS

ARTICLES OF ORGANIZATION

(General Laws, Chapter 180)

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I hereby certify that, upon examination of these Articles of Organization, duly submitted to me, it appears that the provisions of the General Laws relative to the organization of corporations have been complied with, and I hereby approve said articles; and the filing fee in the amount of \$ \_\_\_\_\_ having been paid, said articles are deemed to have been filed with me this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_.

*Effective date:* \_\_\_\_\_

**WILLIAM FRANCIS GALVIN**

*Secretary of the Commonwealth*

**TO BE FILLED IN BY CORPORATION**

**Photocopy of document to be sent to:**

\_\_\_\_\_  
Attorney John E. O'keefe

\_\_\_\_\_  
38 Brigham Street

\_\_\_\_\_  
Marlborough, Massachusetts 01752

\_\_\_\_\_  
Telephone: 1-508-481-6095

WILLIAMS VILLAGE LLC

COMMONWEALTH OF MASSACHUSETTS

DATE	INVOICE NO	DESCRIPTION	INVOICE AMOUNT	DEDUCTION	BALANCE		
10-04-99	10/4/99	ARTICLES/ORGANIZTION	35.00	.00	35.00		
CHECK DATE	10-04-99	CHECK NUMBER	14	TOTAL >	35.00	.00	35.00

PLEASE DETACH AND RETAIN FOR YOUR RECORDS

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

WILLIAMS VILLAGE LLC

38 BRIGHAM ST  
MARLBRO, MA 01752

METROWEST BANK  
FRAMINGHAM, MA 01752

53-7049  
2113

DATE  
October 4, 1999

CHECK NO.  
14

AMOUNT  
\$\*\*\*\*\*35.00

Pay: \*\*\*\*\*Thirty-five dollars and no cents

TO THE  
ORDER OF

COMMONWEALTH OF MASSACHUSETTS



THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK—HOLD AT AN ANGLE TO VIEW

⑈0000014⑈ ⑆211370493⑆87 004836 0⑈

978-474-9774

Form **SS-4**  
(Rev. December 1995)  
Department of the Treasury  
Internal Revenue Service

# Application for Employer Identification Number

(For use by employers, corporations, partnerships, trusts, estates, churches, government agencies, certain individuals, and others. See instructions.)

EIN 04-3502885  
OMB No. 1545-0003

► Keep a copy for your records.

Please type or print clearly.	1 Name of applicant (Legal name) (See instructions.) <b>The Villages at Crane Meadow Condominium Association, Inc.</b>	
	2 Trade name of business (if different from name on line 1) <b>Same</b>	3 Executor, trustee, "care of" name <b>n/a</b>
	4a Mailing address (street address) (room, apt., or suite no.) <b>38 Brigham Street</b>	5a Business address (if different from address on lines 4a and 4b) <b>Same</b>
	4b City, state, and ZIP code <b>Marlborough, MA 01752</b>	5b City, state, and ZIP code <b>Same</b>
	6 County and state where principal business is located <b>Middlesex County, Massachusetts</b>	
	7 Name of principal officer, general partner, grantor, owner, or trustor—SSN required (See instructions.) ► <b>025-46-4388</b> <b>David A. Franchi, Treasurer</b>	

8a Type of entity (Check only one box.) (See instructions.)

<input type="checkbox"/> Sole proprietor (SSN)	<input type="checkbox"/> Partnership	<input type="checkbox"/> Personal service corp.	<input type="checkbox"/> Estate (SSN of decedent)	<input type="checkbox"/> Plan administrator-SSN
<input type="checkbox"/> REMIC	<input type="checkbox"/> State/local government	<input type="checkbox"/> Limited liability co.	<input type="checkbox"/> Other corporation (specify) ►	<input type="checkbox"/> Trust
<input type="checkbox"/> Other nonprofit organization (specify) ► <b>Mass Chapter 180</b> (enter GEN if applicable)	<input type="checkbox"/> Other (specify) ►	<input type="checkbox"/> National Guard	<input type="checkbox"/> Federal Government/military	<input type="checkbox"/> Farmers' cooperative
			<input type="checkbox"/> Church or church-controlled organization	

8b If a corporation, name the state or foreign country (if applicable) where incorporated

State <b>Massachusetts</b>	Foreign country <b>n/a</b>
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9 Reason for applying (Check only one box.)

<input checked="" type="checkbox"/> Started new business (specify) ► <b>a not for profit corporation</b>	<input type="checkbox"/> Banking purpose (specify) ►
<input type="checkbox"/> Hired employees	<input type="checkbox"/> Changed type of organization (specify) ►
<input type="checkbox"/> Created a pension plan (specify type) ►	<input type="checkbox"/> Purchased going business
	<input type="checkbox"/> Created a trust (specify) ►
	<input type="checkbox"/> Other (specify) ►

10 Date business started or acquired (Mo., day, year) (See instructions.)  
**October 7, 1999**

11 Closing month of accounting year (See instructions.)  
**December**

12 First date wages or annuities were paid or will be paid (Mo., day, year). Note: If applicant is a withholding agent, enter date income will first be paid to nonresident alien. (Mo., day, year)

13 Highest number of employees expected in the next 12 months. Note: If the applicant does not expect to have any employees during the period, enter -0-. (See instructions.)

Nonagricultural	Agricultural	Household
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14 Principal activity (See instructions.) ► **Condominium Association under IRS 528**

15 Is the principal business activity manufacturing? If "Yes," principal product and raw material used

Yes  No

16 To whom are most of the products or services sold? Please check the appropriate box.

<input type="checkbox"/> Public (retail)	<input type="checkbox"/> Other (specify) ► <b>n/a</b>	<input type="checkbox"/> Business (wholesale)	<input type="checkbox"/> N/A
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17a Has the applicant ever applied for an identification number for this or any other business? Note: If "Yes," please complete lines 17b and 17c.

Yes  No

17b If you checked "Yes" on line 17a, give applicant's legal name and trade name shown on prior application, if different from line 1 or 2 above.

Legal name ► Trade name ►

17c Approximate date when and city and state where the application was filed. Enter previous employer identification number if known.

Approximate date when filed (Mo., day, year)	City and state where filed	Previous EIN
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Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Business telephone number (include area code)
Fax telephone number (include area code)

Name and title (Please type or print clearly.) ►

Signature ► *David A. Franchi* Date ► **2/16/00**

Note: Do not write below this line. For official use only.

Please leave blank ►	Geo.	Ind.	Class	Size	Reason for applying
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