

Exhibit B
Determination of Need
Attachments

Exhibit B.b
Copy of Notice of Intent

Notice of Public Announcement Concerning a Proposed Health Care Project

UMASS Memorial MRI & Imaging Center, LLC ("Applicant") located at 700 Congress Street, Suite 204, Quincy, Massachusetts 02169 is republishing this notice as a correction to the original notice filed on March 7, 2022. The Applicant intends to file a Notice of Determination of Need ("Application") with the Massachusetts Department of Public Health ("DPH") for the addition of a Positron Emission Tomography - Computed Tomography (PET/CT) mobile unit to be located at UMass Memorial Health - Marlborough Hospital, 157 Union Street, Marlborough, Massachusetts 01752. The total amended value of the Project is \$380,687. The Applicant does not anticipate any price or service impacts to the Applicant's existing patient panel as a result of the Project. Any ten Taxpayers of Massachusetts may register in connection with the intended Application no later than October 14, 2022 or 30 days of the Filing Date, whichever is later, by contacting the Department of Public Health, Determination of Need Program, 250 Washington Street, 6th floor, Boston, MA 02108 or dph.don@state.ma.us

September 30, 2022

#NY0060594

Boston Herald



bostonherald.com

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Notice URL:

[Back](#)

Notice File:

Notice Publish Date:



[USR821_U826_09302022_2383338.pdf](#) Friday, September 30, 2022

Notice Content

PLEASE NOTE: The following text was electronically converted from the PDF document above, and may not be 100% accurate. Because of this, please view the PDF for the most accurate information.

Notice of Public Announcement Concerning a Proposed Health Care Project UMASS Memorial MRI & Imaging Center, LLC ("Applicant") located at 700 Congress Street, Suite 204, Quincy, Massachusetts 02169 is republishing this notice as a correction to the original notice filed on March 7, 2022. The Applicant intends to file a Notice of Determination of Need ("Application") with the Massachusetts Department of Public Health ("DPH") for the addition of a Positron Emission Tomography - Computed Tomography (PET/CT) mobile unit to be located at UMass Memorial Health - Marlborough Hospital, 157 Union Street, Marlborough, Massachusetts 01752. The total amended value of the Project is \$380,687. The Applicant does not anticipate any price or service impacts to the Applicant's existing patient panel as a result of the Project. Any ten Taxpayers of Massachusetts may register in connection with the intended Application no later than Octob

Web display limited to 1,000 characters. Please view the PDF for the complete Public Notice.

[Back](#)

Exhibit B.c
Affidavit of Truthfulness Form



Massachusetts Department of Public Health
Determination of Need
Affidavit of Truthfulness and Compliance
with Law and Disclosure Form 100.405(B)

Version: 7-6-17

Instructions: Complete information below. When complete check the box "This document is ready to print:". This will date stamp and lock the form. Print form. Each person must sign and date the form. When all signatures have been collected, scan the document and e-mail to: dph.don@state.ma.us Include all attachments as requested.

Application Number: Original Application Date:

Applicant Name:

Application Type:

Applicant's Business Type: Corporation Limited Partnership Partnership Trust LLC Other

Is the Applicant the sole member or sole shareholder of the Health Facility(ies) that are the subject of this Application? Yes No

The undersigned certifies under the pains and penalties of perjury:

1. The Applicant is the sole corporate member or sole shareholder of the Health Facility[ies] that are the subject of this Application;
2. I have read 105 CMR 100.000, the Massachusetts Determination of Need Regulation;
3. I understand and agree to the expected and appropriate conduct of the Applicant pursuant to 105 CMR 100.800;
4. I have read this application for Determination of Need including all exhibits and attachments, and certify that all of the information contained herein is accurate and true;
5. I have submitted the correct Filing Fee and understand it is nonrefundable pursuant to 105 CMR 100.405(B);
6. I have submitted the required copies of this application to the Determination of Need Program, and, as applicable, to all Parties of Record and other parties as required pursuant to 105 CMR 100.405(B);
7. I have caused, as required, notices of intent to be published and duplicate copies to be submitted to all Parties of Record, and all carriers or third-party administrators, public and commercial, for the payment of health care services with which the Applicant contracts, and with Medicare and Medicaid, as required by 105 CMR 100.405(C), et seq.;
8. I have caused proper notification and submissions to the Secretary of Environmental Affairs pursuant to 105 CMR 100.405(E) and 301 CMR 11.00;
9. If subject to M.G.L. c. 6D, § 13 and 958 CMR 7.00, I have submitted such Notice of Material Change to the HPC - in accordance with 105 CMR 100.405(G);
10. Pursuant to 105 CMR 100.210(A)(3), I certify that both the Applicant and the Proposed Project are in material and substantial compliance and good standing with relevant federal, state, and local laws and regulations, as well as with all previously issued Notices of Determination of Need and the terms and Conditions attached therein;
11. I have read and understand the limitations on solicitation of funding from the general public prior to receiving a Notice of Determination of Need as established in 105 CMR 100.415;
12. I understand that, if Approved, the Applicant, as Holder of the DoN, shall become obligated to all Standard Conditions pursuant to 105 CMR 100.310, as well as any applicable Other Conditions as outlined within 105 CMR 100.000 or that otherwise become a part of the Final Action pursuant to 105 CMR 100.360;
13. Pursuant to 105 CMR 100.705(A), I certify that the Applicant has Sufficient Interest in the Site or facility; and
14. Pursuant to 105 CMR 100.705(A), I certify that the Proposed Project is authorized under applicable zoning by-laws or ordinances, whether or not a special permit is required; or,
 - a. If the Proposed Project is not authorized under applicable zoning by-laws or ordinances, a variance has been received to permit such Proposed Project; or,
 - b. The Proposed Project is exempt from zoning by-laws or ordinances.

LLC

All parties must sign. Add additional names as needed.

Thomas A. Shields

Name:

Signature:

06/28/2022
Date

This document is ready to print:

Date/Time Stamp:

Exhibit B.d

Scanned Copy of Application Filing Fee Check

UMass Memorial MRI and Imaging Center, LLC
V0291--Commonwealth of MA
Print As: Commonwealth of MA

811965
Santander Bank
Santander_00899_8885
Date: 10/06/2022

Date	Bill #	Reference Number	Term Discount	Amount Paid/Applied
03/28/2022	MAR 28 2022A	DoN Filing...C license)	\$0.00	\$761.37
Net Amount:				\$761.37

Page 1 of 1

UMass Memorial MRI and Imaging Center, LLC
V0291--Commonwealth of MA
Print As: Commonwealth of MA

811965
Santander Bank
Santander_00899_8885
Date: 10/06/2022

Date	Bill #	Reference Number	Term Discount	Amount Paid/Applied
03/28/2022	MAR 28 2022A	DoN Filing...C license)	\$0.00	\$761.37
Net Amount:				\$761.37

Page 1 of 1

UMass Memorial MRI and Imaging Center, LLC
55 Christy's Drive
Brockton, MA 02301

Santander Bank
5-7515-0110

811965
Date: 10/06/2022

Pay Seven Hundred Sixty One Dollars and 37 Cents

\$761.37

Pay to the Order of Commonwealth of MA
United States

Void If Not Cashed After 90 Days **Non-negotiable**

Exhibit B.e

Affiliated Parties Table Question 1.9



Massachusetts Department of Public Health Determination of Need Affiliated Parties

Version: DRAFT
3-15-17

Application Date: Application Number:

Applicant Information

Applicant Name:

Contact Person: Title:

Phone: Ext: E-mail:

Affiliated Parties

1.9 Affiliated Parties:
List all officers, members of the board of directors, trustees, stockholders, partners, and other Persons who have an equity or otherwise controlling interest in the application.

Add/Del Rows	Name (Last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
+	Shields	Thomas	700 Congress Street Suite 204	Quincy	MA	Shields Health Care Group	Chief Executive Officer	Partnership		No	Please See Attached List	No

Document Ready for Filing

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form. To make changes to the document un-check the "document is ready to file" box. Edit document then lock file and submit Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the "E-mail submission to Determination of Need" button.

This document is ready to file:
Date/time Stamp:

Affiliated Parties Supplement: Thomas Shields

Legal Name	DBA	Service Location Address	City/Town	State	Zip	Medicare PTAN
Southeastern Massachusetts Regional MRI Limited Partnership	Shields MRI Brockton	265 Westgate Dr	Brockton	MA	02301-1817	016469
Fall River-New Bedford Regional MRI Limited Partnership	Shields MRI Dartmouth	313 Faunce Corner Rd	Dartmouth	MA	02747-1252	018869
Fall River-New Bedford Regional MRI Limited Partnership	Shields MRI at St Luke's Hospital	361 Allen St	New Bedford	MA	02740-2107	0028894
Shields Healthcare of Cambridge Inc	Shields MRI Brighton	385 Western Ave	Brighton	MA	02135-1005	020369
South Shore MRI Limited Partnership	Shields MRI Weymouth	26 Rockway Ave	Weymouth	MA	02188-3906	327033
Massachusetts Bay Regional MRI Limited Partnership	Shields MRI Boston	161 Granite Ave	Dorchester	MA	02124-5492	020169
Massachusetts Bay Regional MRI Limited Partnership	Shields MRI Dedham	40 Allied Dr - Ste 112	Dedham	MA	02026-6146	0034538
Shields MRI & Imaging Center of Cape Cod LLC	Shields MRI & Imaging Center of Cape Cod	2 Iyanough Rd - Rt 28	W Yarmouth	MA	02673-8135	327057
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial Shrewsbury St	214 Shrewsbury St	Worcester	MA	01604-4629	002737301
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial Memorial Campus	119 Belmont St-U Mass Memorial Campus	Worcester	MA	01605-2903	002737302
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at Wing Hospital	40 Wright St	Palmer	MA	01069-1138	327040
U Mass Memorial MRI & Imaging Center LLC	Shields PETCT at UMass Memorial Burbank	275 Nichols Rd	Fitchburg	MA	01420-1919	0027373
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial University Campus Ste B	55 Lake Ave North Ste H1-713B	Worcester	MA	01655-0002	5300166800
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial University Campus Ste A	55 Lake Ave North Ste H1-351A	Worcester	MA	01655-0002	5300563649
Baystate MRI & Imaging Center LLC	Shields MRI and Baystate Health	80 Wason Ave	Springfield	MA	01107-1132	0018589
Shields Imaging of Eastern Massachusetts LLC	Shields Imaging of Eastern Massachusetts	55 Fogg Rd	S Weymouth	MA	02190-2432	327088
U Mass Memorial HealthAlliance MRI Center LLC	Shields MRI at UMass Memorial Health Alliance Campus	100 Hospital Rd-Ste 1A	Leominster	MA	01453-2253	327082
Shields MRI of Framingham LLC	Shields MRI of Framingham	14 Cochituate Rd	Framingham	MA	01701-7915	327116
U Mass Memorial MRI-Marlborough LLC	Shields MRI at UMass Memorial Marlborough Campus	157 Union St	Marlborough	MA	01752-1228	327115
Franklin MRI Center LLC	Shields MRI at Baystate Franklin Medical Center	164 High St	Greenfield	MA	01301-2613	0010942
Radiation Therapy of Winchester LLC	Winchester Hospital Radiation Oncology Center	620 Washington St	Winchester	MA	01890-1328	0000272
Cape Cod PET-CT Services LLC	Shields PET Service of Cape Cod Harwich	525 Long Pond Dr	Harwich	MA	02645-1227	0010594
Cape Cod PET-CT Services LLC	Shields PET Service of Cape Cod Sandwich	2 Jan Sebastian Dr	Sandwich	MA	02563-2377	001059401
PET-CT Services By Tufts Medical Center and Shields LLC	Shields PETCT at Tufts Medical Center	800 Washington St	Boston	MA	02111-1552	0024437
PET-CT Services By Tufts Medical Center and Shields LLC	Metrowest PET-CT at Shields Framingham in Affiliation with Tufts Medical Center	14 Cochituate Rd-Ste 1A	Framingham	MA	01701-7915	5300129479
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital	295 Varnum Ave	Lowell	MA	01854-2134	0025829
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital Chelmsford	10 Research Pl	N Chelmsford	MA	01863-2456	002582901
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital Saints Campus	1 Hospital Dr	Lowell	MA	01852-1311	5100138677
Winchester Hospital-Shields MRI LLC	Shields MRI Winchester Hospital at Unicorn Park	200 Unicord Park Dr-Ste 402	Woburn	MA	01801-3342	0033808
Winchester Hospital - Shields MRI	Winchester Hospital/Shields MRI	41 Highland Ave - Ste G1	Winchester	MA	01890-1446	5300634235
Shields Signature Imaging LLC	Shields Signature Imaging	680 Centre St	Brockton	MA	02302-3308	5300291877
Shields Sturdy PETCT LLC	Shields Sturdy PETCT	211 Park St	Attleboro	MA	02703-3143	5300305002
Shields PETCT at Cooley Dickinson Hospital LLC	Shields PETCT at Cooley Dickinson Hospital	30 Locust St	Northampton	MA	01060-2052	5300333217
Shields Imaging at Anna Jaques Hospital LLC	Shields Imaging at Anna Jaques Hospital	25 Highland Ave	Newburyport	MA	01950-3867	5300357534
Shields PET-CT at CMMC LLC	Shields PETCT at CMMC	300 Main St	Lewiston	ME	04240-7027	E300352765
Shields PET-CT at CMMC LLC	Shields PETCT at CMMC @ Topsham	105 Topsham Fair Mall Rd	Topsham	ME	04086-1773	E300511797
Shields Imaging at York Hospital LLC	Shields Imaging at York Hospital	114 Sanford Rd	Wells	ME	04090-5533	E100388241
Shields PETCT at Berkshire Medical Center LLC	Shields PETCT at Berkshire Medical Center	165 Tor Court	Pittsfield	MA	01201-3001	5300426507
Shields Imaging of Portsmouth LLC	Shields MRI Portsmouth	1900 Lafayette Rd	Portsmouth	NH	03801-5679	n/a
Healthcare Enterprises LLC	The Surgery Center at Shrewsbury	151 Main St	Shrewsbury	MA	01545-2101	5300494903
Shields Imaging with Central Maine Health LLC	Shields Imaging at Central Maine Health, Topsham	105 Topsham Fair Mall Rd	Topsham	ME	04086-1773	E300498988
Shields Imaging with Central Maine Health LLC	Shields Imaging at Central Maine Health, Auburn	690 Minot Ave, Ste 1	Auburn	ME	4210	E300520539
Baystate Health Urgent Care Center LLC	Baystate Health Urgent Care Longmeadow	688 Bliss Rd	Longmeadow	MA	01106-1534	5100483242
Baystate Health Urgent Care Center LLC	Baystate Health Urgent Care Feeding Hills	241 S Westfield St	Feeding Hills	MA	01030-2713	5100483242
Baystate Health Urgent Care Center LLC	Baystate Health Urgent Care Westfield	24 Union Street	Westfield	MA	01085	5100483242
Natick Surgery Center, LLC	New England Surgical Suites	313 Speen St - Ste 200	Natick	MA	01760	5300693361
Medford Surgery Center, LLC	Medford Surgery Center	170 Governors Ave -Ste 100	Medford	MA	02155	5300777754
Shields Radiology Assoc		214 Shrewsbury St	Worcester	MA	01604-4629	
Shields Tufts Medical Center Imaging Management LLC		800 Washington St	Boston	MA	02111	
Shields Imaging Management at Emerson Hospital LLC		133 Old Road to 9 Acre Corner	Concord	MA	01742	
Shields Imaging Management at Emerson Hospital LLC		133 Littleton Road	Westford	MA	01886	
Maine Imaging Services LLC		128 State Street - #3	Augusta	ME	04330	
Cape Cod Imaging Services LLC		27 Park St	Hyannis	MA	02601	
Cape Cod Imaging Services LLC		525 Pond Drive	Harwich	MA	02645	
Cape Cod Imaging Services LLC		35 Wilkens Lane	Hyannis	MA	02601	
Cape Cod Radiation Therapy Services LLC		1 Ter Heun Drive, 1st floor	Falmouth	MA	02540	
Chelmsford Surgery Center LLC	The Surgery Center of the Merrimack Valley	10 Research Pl, Suite 10	N Chelmsford	MA	01863	5300817670

Exhibit B.f

Change in Service Tables Questions 2.2 & 2.3



Massachusetts Department of Public Health Determination of Need Change in Service

Version: DRAFT
6-14-17

Application Number: UMMIC-22062409-RE

Original Application Date: 06/24/2022

Applicant Information

Applicant Name: UMass Memorial MRI & Imaging Center, LLC

Contact Person: Courtney Pasay Vaughan Title: Attorney

Phone: 9789982464 Ext: E-mail: cpvaughan@publicpolicylaw.com

Facility: Complete the tables below for each facility listed in the Application Form

1 Facility Name: UMass Memorial MRI & Imaging Center (@ Marlborough Hospital) CMS Number: 327115 Facility type: Clinic

Change in Service

2.2 Complete the chart below with existing and planned service changes. Add additional services with in each grouping if applicable.

Add/Del Rows		Licensed Beds		Change in Number of Beds (+/-)		Number of Beds After Project Completion (calculated)		Patient Days	Patient Days	Occupancy rate for Operating Beds		Average Length of Stay (Days)	Number of Discharges	Number of Discharges
		Existing	Existing	Licensed	Operating	Licensed	Operating	(Current/ Actual)	Projected	Current Beds	Projected	(Days)	Actual	Projected
	Acute													
	Medical/Surgical									0%	0%			
	Obstetrics (Maternity)									0%	0%			
	Pediatrics									0%	0%			
	Neonatal Intensive Care									0%	0%			
	ICU/CCU/SICU									0%	0%			
<input type="checkbox"/>										0%	0%			
	Total Acute									0%	0%			
	Acute Rehabilitation									0%	0%			
<input type="checkbox"/>										0%	0%			
	Total Rehabilitation									0%	0%			
	Acute Psychiatric													

Add/Del Rows		Licensed Beds		Change in Number of Beds (+/-)		Number of Beds After Project Completion (calculated)		Patient Days (Current/Actual)	Patient Days Projected	Occupancy rate for Operating Beds		Average Length of Stay (Days)	Number of Discharges	
		Existing	Existing	Licensed	Operating	Licensed	Operating			Current Beds	Projected		Actual	Projected
	Adult									0%	0%			
	Adolescent									0%	0%			
	Pediatric									0%	0%			
	Geriatric									0%	0%			
<input type="checkbox"/>										0%	0%			
	Total Acute Psychiatric									0%	0%			
	Chronic Disease									0%	0%			
<input type="checkbox"/>										0%	0%			
	Total Chronic Disease									0%	0%			
	Substance Abuse													
	detoxification									0%	0%			
	short-term intensive									0%	0%			
<input type="checkbox"/>										0%	0%			
	Total Substance Abuse									0%	0%			
	Skilled Nursing Facility													
	Level II									0%	0%			
	Level III									0%	0%			
	Level IV									0%	0%			
<input type="checkbox"/>										0%	0%			
	Total Skilled Nursing									0%	0%			

2.3 Complete the chart below if there are changes other than those listed in table above.

Add/Del Rows	List other services if Changing e.g. OR, MRI, etc	Existing Number of Units	Change in Number +/-	Proposed Number of Units	Existing Volume	Proposed Volume
<input type="checkbox"/>	PET-CT	0	1	1		165

Document Ready for Filing

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form. To make changes to the document un-check the "document is ready to file" box. Edit document then lock file and submit. Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the "E-mail submission to Determination of Need" button.

This document is ready to file:

Date/time Stamp: 09/16/2022 11:42 am

E-mail submission to
Determination of Need

Exhibit B.h

Evidence of Community Engagement for Factor 1:
Information Session Presentation to PFAC and Board of Trustees
+ Board of Trustee Members

High-Value Diagnostic Services Provided Locally

MOBILE PET/CT SERVICES IN MARLBOROUGH, MASSACHUSETTS

Our vision:

Welcome and thank you for your interest in this project

We are excited to share our plans to add mobile PET/CT services at Marlborough Hospital

This project will share existing imaging space with the mobile MRI service on its dormant day (Sunday)

PET/CT services will complement the cancer treatment and breast services currently provided at Marlborough Hospital

The service will operate on an outpatient fee schedule which will lower the cost of services

This is an opportunity to introduce you to some of the individuals involved, solicit your feedback & any answer questions

What is a mobile PET/CT?

PET/CT is a radiology based imaging tool which is valuable in staging cancer, evaluating Alzheimer's disease, and also has cardiac applications

Patients in the Marlborough community currently seek treatment services like chemotherapy and radiation therapy at Marlborough Hospital but must currently travel outside the community to have a PET/CT which would aid in determining these treatments

Providing PET/CT in a mobile environment allows community hospitals with less demand provide this care locally in a shared use model

The Joint Venture between UMASS Memorial and Shields Health Care Group has current services located in Worcester and Fitchburg

Patients would enter the hospital radiology department and would enter the mobile environment that is temporarily attached to the building, enclosed from the outside elements

Current patient experience surveys at the current joint venture locations is 98% or better.

Benefits of a mobile PET/CT service

01

High Value

- Outpatient reimbursement with a high value service creates high patient satisfaction with lower out of pocket responsibility

02

Provides greater patient experience

- greater scheduling flexibility
- Highly experienced technical staff
- State of the art equipment

03

Keeps care to the community

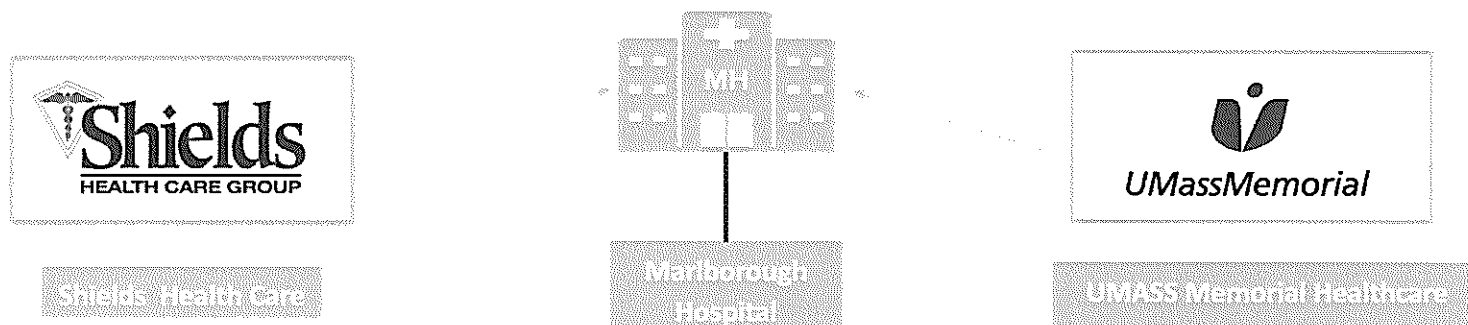
- easy, convenient location
- Transportation assistance
- provides local option for physicians and patients

04

Increases accessibility of care

- Efficient weekly offered care minimizes time to treatment
- shifts appropriate care from inpatient to outpatient

Summary: Mobile PET/CT Services at Marlborough Hospital



Services

- PET/CT Service every Sunday
- Cancer staging, Alzheimer's disease evaluation, cardiac applications

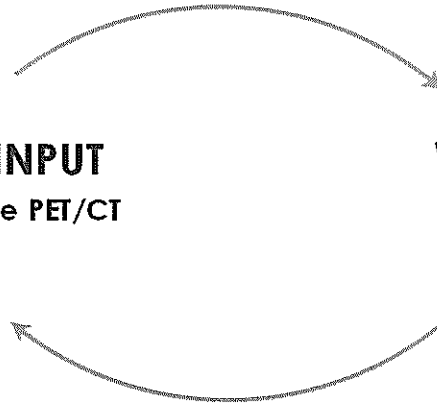
Facility

- Shared space with mobile MRI
- same convenient location – lower cost of care

Next Steps

WE WANT YOUR INPUT
on the concept of mobile PET/CT

WE WILL KEEP YOU INFORMED
as project progresses with DPH



Board of Trustees

2022

- Brian Bouvier
 - President
 - Bouvier Pharmacy
- Douglas Brown (ex-officio)
 - President, UMass Memorial Community Hospitals, Inc.
 - Chief Administrative Officer, UMass Memorial Health Care
- Charles Cavagnaro, MD (ex-officio)
 - Chief Medical Officer
 - UMass Memorial - Marlborough Hospital
 - UMass Memorial - HealthAlliance-Clinton
- Ellen Dorian
 - President
 - Main Street Bank
- William Fischer
 - Community member
- John Gobron (ex-officio)
 - Co-chair
 - Marlborough Hospital Patient Family Advisory Council
- Kimi Kobayashi, MD
 - Chief Quality Officer
 - UMass Memorial Health
- Joseph Leandres
 - Community member
- Ann Molloy, Esq., Vice Chair
 - Partner
 - Mountain, Dearborn & Whiting
- Michael Murphy, Chair
 - President
 - Murphy Insurance Agency
- Bhalchandra Parulkar, MD
 - President
 - Marlborough Hospital Medical Staff
- Philip Purcell
 - Vice President
 - Hanscom Federal Credit Union
- Gerard Richer Esq.
 - Community member
- Steve Roach, President
 - Marlborough Hospital
 - HealthAlliance-Clinton
- Kimberly Robinson, MD
 - Director, Intensive Care Unit
 - Marlborough Hospital
- Vibha Sharma, MD
 - Chief, Infectious Disease
 - Marlborough Hospital

Exhibit B.i
Limited Liability Company Documents

Per instruction from the Department of Public Health, UMass Memorial MRI & Imaging Center, LLC ("Applicant") is providing a link to its corporate documents on the Massachusetts Secretary of State's website for accessibility purposes. Please use the following link to access the Applicant's Articles of Organization and three (3) Certificates of Amendment on the Secretary of State's website:

<https://corp.sec.state.ma.us/CorpWeb/CorpSearch/CorpSummary.aspx?sysvalue=uyDGbk61ALuXbZIDiRgKKzyV36rR2zROGWwfwITL9Cs->