

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

Filing Period: September 1 - November 1 · This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE

1. Entity ID No.	2. Exact na	me of the limited liab	bility company		
834537	3D Development, LLC				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Real Estate				
5. Principal office address 498 Broadway			City Providence	State RI	Zip 02908
s. Mailing address of	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT F	ERSON:	
Frank Miele			Contact Title Member	A A A A A A A A A A A A A A A A A A A	Wassel and the second s
Street Address 498 Broadway			City Providence	State RI	Zip 02908
LIST <u>all</u> Managers ("X" box for attach	(NAMES AND ADI MENT) [RESSES) OF THE	LIMITED LIABILITY COMPANY, II	APPLICABLE - DO	ione (Stellenbers
anager Name IONE			Manager Name NONE		
Street Address			Street Address		
Dity	State RI	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
Dity	State	Zip	City	State	Zip
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		Office of the Secr	etary of State. Changes require f	iling Form 642.	ad Bergerakan (2.101, tawa 1.101, da 1.101)
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to Ped waters and Proceedings to the transfer

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person

Frank Miele, Member

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012