

A. Ralph Moills, Secretary of State Corporations Division 148 W. River Street

1-200

Providence Richmondules

Plical

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR_

ID No.	2. Exact name of th	e limited liability company				
158492	Urban Smart Gr	Urban Smart Growth LLC				
3 State of Formation	4. Brief de	4. Brief description of the character of the hustness which is actually conducted in Rhode Island				
NEVADA	1267	il estate Dei	16100ment			
S Principal office au		```	C ^H D	State	Zip	
1005	Main S		Pawtucket	RE	07860	
oniaci Name	DAESS OF LIMITED	LIABILITY COMPANY AND	NAME OR TITLE OF CONTACT Contact Title	" PRESON:		
Lance Jay Robbins			Manages	Manages		
Street Address			City	State	Zip C.	
1005	Main St	rect	Pautchet	RI	03860	
. NAME AND A	DDRESS OF EACH N	LANAGER OF THE LIMITE	D LIABILITY COMPANY, IF APP	LICABLE DO NOT LI	T MEMBERS	
**		l in spaces before usin	IG ATTACHMENTS ("X" BOX F	OR ATTACHMENT)		
Manager Name	GO-COT 6	110	Manager Name	(1) Day -1 - 2	7 *	
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<u>π.60.60</u> 2109			Strong Address (740 N)	vherokæ Av	e #2-1	
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tanager Name	2.04		Manager Name	l		
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treet Address			Street Address	Street Address		
'ar	State	Zip	Clb ^a	State	Zip	
. RESIDENT AG	; Ent in Rhode isl	 AND - DO NOT ALTÈR - CI	: banges require filing of Form	 642 - M.J.G.L. 7-16-11	ı	
gent Name			Address			
ARASEARCH, IN	C.					
Address			City	Zip		
22 JEFFERSON B	SOULEVARD, SUITE 200	<u> </u>	WARWICK	02888-	22 /	
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	i nis re	port must be executed by an	s authorized person pursuant to F	K.I.G.L. 7-10-00 (9).		
					7: 09	
			Under namelty of ne	zjury, I declare and affirm that	I have exemined this repor	
		·		npanying schedules and statem	ents, and that all statement	
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ile Date	FILED		including any accom		ents, and that all statement	
NC			including any accom- contained herein are	true and correct.		
	FILED		including any accom	true and correct.		
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