RI SOS Filing Number: 200836208920 Date: 10/06/2008 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2008

Filing Period: September 1 - November 1 • **Filing Fee:** $50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of $25.00.

1. ID No.	2. Exact name of the limited liability company
129439	MERANDI REALTY, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	OWNERSHIP, MAINTENANCE, MANAGEMENT OF REAL ESTATE

5. Principal office address	City	State	Zip
12 Rowley Street	East Providence	RI	02914

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
John Merandi	Manager

Street Address	City	State	Zip
12 Rowley Street	East Providence	RI	02914

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐

Manager Name	Manager Name
John Merandi	John Merandi, Jr.
Street Address: 12 Rowley Street	Street Address: 12 Rowley Street
City: East Providence; State: RI; Zip: 02914	City: East Providence; State: RI; Zip: 02914
Manager Name: Gina Caroulo	Manager Name:
Street Address: 53 Russell Avenue	Street Address:
City: East Providence; State: RI; Zip: 02914	City: ; State: ; Zip:

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11

Agent Name	Address
James A. Bigos, Esq.	
Address: 2176 Mendon Road, Suite 2000	City: Cumberland; Zip: 02864-3805

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

[redacted] 129439 [redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

John Merandi 9/30/08
Signature of Authorized Person *Date*

John Merandi
Print or Type Name of Authorized Person

[redacted]

File Date FILED
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OCT 0 6 2008
By: 1990
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Form 632 Rev. 07/07