

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

1. Corporate ID No.		2. Name of Corporation				
65702	1	REALTY, INC.				
3. Street Address Principal Business Office 1478 Atwood Avenue Suite 211			City Johnston	State RI	<i>Ζψ</i> 02911	
. Business Phone No. 5. State of Incorporation Rhode Island			•			
6. Brief Description of the C to buy, sell, manage	Character of Business Condi e, hold, finance and o	ucted in Rbode Island wn real estate				
7. NAMES AND ADD	RESSES OF THE OFF	TICERS: ("X" BOX FOR ATTA	CHMENT) [FILL IN	SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Allen H. Cicchitelli			Allen H. Cicchitelli			
Street Address 1478 Atwood Avenue Suite 211			Street Address 1478 Atwood Avenue Suite 211			
City Johnston	State RI	^{Zip} 02911	Gity Johnston	State RI	^{Zip} 02919	
Secretary Name Allen H. Cicchitelli			Treasurer Name Allen H. Cicchitelli			
Street Address 1478 Atwood Avenue Suite 211			Street Address 1478 Atwood Avenue Suite 211			
City Johnston	State RI	^{Ζφ} 02919	City Johnston	State RI	^{Zip} 02919	
B. NAMES AND ADD	RESSES OF THE DIR	ECTORS: ("X" BOX FOR AT	ACHMENT) [FILL	IN SPACES BEFORE USIN	G ATTACHMENTS	
Oirector Name Allen H. Cicchitelli			Director Name			
Street Address			Street Address			
478 Atwood Aven	ue Suite 211		<u> </u>			
ity	State	Zip	City	Stale	Zip	
lohnston	RI	02919	* * * ********************************			
irector Name			Director Name			
Street Address			Street Address			
шу	State	Zip	Сйу	State	Zip	
. SHARES AUTHORI	IZED	•	: 10. SHARES ISSUE	D ("X" BOX FOR ATTAC	I HMENT) □	
				SECTION MUST BE COMPLETED		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			100	Common	No Par	
his report must be ex-	xecuted on behalf of the	he corporation by an authorize the corporation by the receiver	d representative. If the or trustee.	corporation is in the hand	s of a receiver or trust	
			Under penalty of	perjury, I declare and affirm	that I have examined this	
	····		including any ac	companying schedules and sta	atements, and that all stat	
~11		ı	contained herein	are true and correct,		

File Date FILED	
Check No. FEB 02 2010	-
By: 3v 189	-
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and	l affirm that I have examined this report,
including any accompanying schedule	s and statements, and that all statements
contained herein are tode and correct,	/ // 2
Mufleacht	1-28-2010
Signature /	Date
Allen H. Cicchitelli	
Print or Type Name	
President	
THE STATE OF THE S	