

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 2010

Filing Period: September 1 - November 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

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 (berc)) is subject to a penalty fee of \$25.00.

1. ID No. 119503	4	Exact name of the limited liability company owden Realty, LLC				
3. State of Formation Rhode Island 4. Brief description of the character of the busine Ownership of real estate			business which is actually conducted in	Rhode Island		
5. Principal office address 444 Wellington Ave.			City Cranston	State RI	^{Zip} 02910	
6. MAILING ADI Contact Name Waltace Bowde		BILITY COMPANY A	ND NAME OR TITLE OF CONTA	ACT PERSON:	·	
Street Address 444 Wellington Ave.			City Cranston	State RI	<i>Zip</i> 02910	
Manager Name	FILL IN	SPACES BEFORE U	TED LIABILITY COMPANY, IF A SING ATTACHMENTS ("X" BOX Manager Name	FOR ATTACHMENT)	LIST MEMBERS	
Street Address			Street Address			
City	State	Zip	City.	State	Zip	
danager Name	***************************************		Manager Name	Manager Name		
Street Address			Street Address	Street Address		
Σίην	State	Zip	City	State	Ζφ	
	ENT IN RHODE ISLAND s currently of record in the	Office of the Secretary	: y of State. Changes require filing o	 f Form 642 - R.I.G.L. 7-1	I 6-11	

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

119503

File Date	9-29-2010
Check No	0993
Ву:	mnc
FOR	SECRETARY OF STATE USE ONLY

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.

Estate of Wallace Bowden

By William Phin Voy 9/2Z/10
Signature of Authorized Person Exec. Date

Wallace Bowden

Print or Type Name of Authorized Person