

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 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 130417	1 "	t name of the limited liability company Id T. Lariviere LLC				
3. State of Formation 4. Brief description of the character of the h. Real Estate Development			isiness which is actually conducted in Ri	bode Island		
5. Principal office address 651 COTTAGE STREET			City Pawtucket	State RI	^{Ζψ} 02861	
6: MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND N. Contact Name Ronald T. Lariviere			Contact Title			
Street Address 651 COTTAGE STREET			City Pawtucket	State RI	<i>Zip</i> 02861	
7. NAME AND ADDI			d liability company, if ai ng attachments ('x' box			
Manager Name Ronald T. Lariviere	e_		Manager Name	Manager Name		
Street Address 651 Cottage Stree	t		Street Address	Street Address		
City Pawtucket	State RI	<i>Zip</i> 02861	City	State	Zψ	
Manager Name			Manayer Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
2. 1924 pt. 2000 proper provide the pill 125	rently of record in the	Office of the Secretary	of State. Changes require filing o	f Form 642 - R.I.G.L. 7-1	6-11	

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

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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.

Signature of Authorized Person

Date

Ronald T. Lariviere

Print or Type Name of Authorized Person