RALPH MOL	State of Rhode Island and Office of the Se			5 Fee: \$50.
	Division Of Bu	usiness Services		
		iver Street		
u hand		I 02904-2615		
E. Gu	(401) 22			
stary of		.2-3040		
imited Liability	y Company			
nnual Report iling Period: Septe	ember 1 - November 1			
accordance with	R.I.G.L. 7-16-66(d), each limited liability	v companv failing	or refusina to	
	t within thirty (30) days after the time pre			
-16-66(b&c)) is su	bject to a penalty fee of \$25.00.			
ANNUAL REPORT	YEAR: <u>2011</u>			
1. ID No. <u>000</u>	140082			
2 Exact Name a	f the Limited Liebility Company Wa	whose of Orengo	Associatos II	C
	f the Limited Liability Company We		Associates, LL	<u></u>
3. State of Forma	ation			
State: <u>RI</u>				
REAL ESTATE 5. Principal Office No. and Street				
No. and Street:	144 WESTMINSTER STREET	Ctata, DI	7: 02002	Country UCA
City or Town:	PROVIDENCE	State: <u>RI</u>	Zip: <u>02903</u>	Country: <u>USA</u>
U	ss of Limited Liability Company and Contact Title: <u>144 WESTMINISTER STREET</u> <u>PROVIDENCE</u> Iress of Each Manager of the Limited	State: <u>RI</u>	Zip: <u>02903</u>	Country: <u>USA</u>
7 Name and Add			any, ii Applic	
7. Name and Add DO NOT LIST M	-			
	-		Addres	S
DO NOT LIST N	MEMBERS	Address,		S e, Zip Code, Country
DO NOT LIST M Title 3. RESIDENT AGE	MEMBERS Individual Name	ſER		
DO NOT LIST M Title 8. RESIDENT AGE Changes Requi	MEMBERS Individual Name First, Middle, Last, Suffix ENT IN RHODE ISLAND - DO NOT ALT	TER 11	City or Town, Stat	

Signed this 28 Day of October, 2011 at 2:39:49 PM by the authorized person. This electronic

signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By <u>WILLIAM J. PICCERELLI</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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