



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>000487957</u>		2. Exact name of the limited liability company <u>Pestelle LLC</u>			
3. State of Formation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>To hold real estate</u>			
5. Principal office address <u>One New Industrial Rd</u>		City <u>Warren</u>	State <u>RI</u>	Zip <u>02885</u>	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name <u>Estelle Dubuc</u>		Contact Title <u>Bookkeeper</u>			
Street Address <u>One New Industrial Rd</u>		City <u>Warren</u>	State <u>RI</u>	Zip <u>02885</u>	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND <u>Henry R. Kates Esq.</u>					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

FEB 27 2012

164639 11:20

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2012 FEB 27 PM 12:38

File Date _____

Check No _____

By: _____

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.

Estelle Dubuc 2-23-12
Signature of Authorized Person Date

Estelle Dubuc
Print or Type Name of Authorized Person