

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2012

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.	2. Exact name of the limited liability company A & F REALTY, LLC				
151284					
3. State of Formation	4. Brief desc	cription of the characte	r of business conducted in Rho	de Island	
RHODE ISLAND	REAL ESTATE RENTALS				
5. Principal office address P.O. BOX 462			City BRISTOL	State RI	Zip 02809
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT	PERSON:	
Contact Name ANDREW ALEICHO			Contact Title MANAGER		
Street Address P.O. BOX 462			City BRISTOL	State RI	Zip 02809
7. LIST <u>ALL</u> MANAGERS (("X" BOX FOR ATTACHI	NAMES AND ADD	RESSES) OF THE LI	MITED LIABILITY COMPANY,	enn i 1888 hall a la California n	NOT LIST MEMBERS
Manager Name ANDREW ALEICHO			Manager Name		
Street Address P.O. BOX 462			Street Address		
City BRISTOL	State RI	Zip 02809	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RI	HODE ISLAND				a de la companio de La companio de la companio de
This information is curren	tly of record in the	e Office of the Secret	ary of State. Changes require	filing Form 642.	
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Inder no

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

Form No. 632 Revised: 01/2012 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

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ANDREW ALEICHO, MANAGER

Print or Type Name of Authorized Person