



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 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. 136485		2. Exact name of the limited liability company Motley Rice LLC			
3. State of Formation South Carolina		4. Brief description of the character of business conducted in Rhode Island Legal services.			
5. Principal office address 28 Bridgeside Blvd.		City Mt. Pleasant	State SC	Zip 29464	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Samuel B. Cothran, Jr.		Contact Title General Counsel			
Street Address 28 Bridgeside Blvd.		City Mt. Pleasant	State SC	Zip 29464	
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 Ronald L. Motley		Manager Name Joseph F. Rice			
Street Address 28 Bridgeside Blvd.		Street Address 28 Bridgeside Blvd.			
City Mt. Pleasant	State SC	Zip 29464	City Mt. Pleasant	State SC	Zip 29464
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

SEP 28 2012

BY 78366

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.

Samuel B. Cothran, Jr. _____ 9/20/2012
 Signature of Authorized Person Date

Samuel B. Cothran, Jr.
 Print or Type Name of Authorized Person