

Revised: 01/2012

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 2013

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. 505657	2. Exact name of the limited liability company Knox GP, LLC				
3. State of Formation	4 Briof door	rintion of the character	of husiness conducted in Phod	a Island	
Rhode Island	4. Brief description of the character of business conducted in Rhode Island Acquire entity and/or various real property interests, conduct all activities related, necessary or incidental thereto.				
5. Principal office address 5 Cathedral Square			City Providence	State RI	Zip 02903
MAKING ADDRESS OF LIMI	TED LIABILIT	Y COMPANY AND NA		ERSON:	
Contact Name Robert R. Gaudreau, Jr.			Contact Title		
Street Address 5 Cathedral Square			City Providence	State RI	Zip 02903
7. LIST <u>ALL</u> MANAGERS (NAM "X" BOX FOR ATTACHMEN"		RESSES) OF THE LIM	IITED LIABILITY COMPANY, IF	APPLICABLE - <u>DO</u>	NOT LIST MEMBERS
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 RHODI	E ISLAND				<u>ಷ</u> ದ್ವೇ
This information is currently of	record in the	Office of the Secreta	ry of State. Changes require t	iling Form 642.	7 7
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File Date		A.A.	and that all statement		
Check No		口· H·	121	165	/ 9131
Ву:	<u>. </u>		Signature of Authorized	^	Date.
FOR SECRETARY OF STATE	USE ONLY		Robert R. Gaudre	Authorized Person	dent of
Form No. 632			Counedral Da	evelopment Gr	pilnc.