

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.	2. Exact na	2. Exact name of the limited liability company				
473749	Ham	let Realty	, LLC			
3. State of Formation Rhode Island	4. Brief des Owne	eription of the chara ership, ma	ncter of business conducted in Rhode Isl nnagement and renta	and l of real	estate.	
5. Principal office address 77 Hamlet Avenue			City Woonsocket	State RI	^{Zip} 02895	
GLAMUNGADDRIESS OF H	MITECULARIC	TY/COMPANY AND	NAME OR TITLE OF CONTACT PERS	ON:		
Contact Name Stephen A. Remsbecker			Contact Title Managing Meml	Contact Title Managing Member		
Street Address 77 Hamlet Avenue			City Woonsocket	State RI	Zip 02895	
7. LIST ALL MANAGERS (NA (FX) BOX FOR ATTACHME	MESAND AD	DRESSES) OF THE	LIMITED LIABILITY COMPANY, IF AP	PLICABLE - DO N	OT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN RHO						
This information is currently	of record in th	Office of the Secr	retary of State. Changes require filing	Form 642.		
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FILED

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BY	56
File Date Check No.	Under peraity 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. May 10 10 11
By:	Stephen A. Remsbecker, Managing Member
	Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012