RALPH MOLL	tate of Rhode Island and Office of the Se			S Fee: \$50.00
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040				
Limited Liability Com Annual Report Filing Period: September 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR:	<u>2013</u>			
1. ID No. <u>000789672</u>				
2. Exact Name of the Limited Liability Company Jonathan McPhillips Fine Art LLC				
3. State of Formation State: <u>RI</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island Fine Art sales, consignments, and occasional instruction.				
5. Principal Office Addres	SS			
	ILBERT STUART RD. NDERSTOWN	State: <u>RI</u>	Zip: <u>02874</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
No. and Street: 690 G	AN MCPHILLIPS Contact Title: ILBERT STUART RD	<u>OWNER</u>		
City or Town: <u>SAUN</u>	DERSTOWN	State: <u>RI</u>	Zip: <u>02874</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name		Addre	ess
	First, Middle, Last, Suffix	Addr	ess, City or Town, Sta	ate, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
JONATHAN MCPHILLIPS 690 GILBERT STUART RD. SAUNDERSTOWN, RI 02874				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				

Signed this 24 Day of October, 2013 at 9:47:48 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JONATHAN MCPHILLIPS

Signature of Authorized Person

Form No. 632 Revised 09/07

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