

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 nar	ne of the limited liabilit	y company		
104404	Commerce Park Associates 6, LLC				
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island			
Rhode Island		•	t - Real Estate Purchasing		
5. Principal office address 207 Quaker Lane, Suite 300			City West Warwick	State RI	Zip 02893
6. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND NA	AME OR TITLE OF CONTACT PE	RSON:	
Contact Name Nicholas E. Cambio			Contact Title Manager		
Street Address 207 Quaker Lane, Suite 300			City West Warwick	State RI	Zip 02893
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH		PRESSES) OF THE LI	MITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBERS
Manager Name Nicholas E. Cambio			Manager Name Vincent A. Cambio		
Street Address 207 Quaker Lane, Suite 300			Street Address 207 Quaker Lane, Suite 300		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
Manager Name Melissa A. Faria			Manager Name		
Street Address 207 Quaker Lane, Suite 300			Street Address		
City West Warwick	State RI	Zip 02893	City	State	Zip
8. RESIDENT AGENT IN R	HODE ISLAND	I	······································	., 4	
		e Office of the Secret	tary of State. Changes require fil	ing Form 642.	
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RY	M 211931				

	Under penalty of perjury, I declare and affirm			
File Date	this report, including any accompanying sch			
	and that all statements contained herein are t			
Check No				
By:	Signature of Authorized Person			
EOR CECREVARY OF STATE LISE ONLY	Nicholas E. Cambio			

Form No. 632 Revised: 01/2012 that I have examined

edules and statements, rue and correct.

10-13-2013 Date

Print or Type Name of Authorized Person