

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. 000487385	2. Exact name of the limited liability company MCM Maintenance, LLC					
3. State of Formation	Brief description of the character of business conducted in Rhode Island					
Rhode Island	Janitoria	l Services				
5. Principal office address 14 Barnes Avenue			City Johnston	State RI	Zip 02919	
	IMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT	PERSON:		
Contact Name Cathy Murray			Contact Title Manager			
Street Address 14 Barnes Avenue			City Johnston	State Ri	^{Zip} 02919	
7. LIST <u>ALL</u> MANAGERS (N ("X" BOX FOR ATTACHMI		RESSES) OF THE-LI	MITED LIABILITY COMPANY,	IF APPLICABLE - <u>Do</u>	NOT LIST MEMBERS	<u> </u>
Manager Name Cathy Murray			Manager Name			
Street Address 14 Barnes Avenue			Street Address			
City Johnston	State RI	Zip 02919	City	State	Zip 😓	도
Manager Name			Manager Name 25 2			
Street Address			Manager Name Street Address			
City	State	Zip	City	State	Zip 5	SDIV
B. RESIDENT AGENT IN RHO	DDE ISLAND					\exists
This information is currently	of record in the	Office of the Secret	ary of State. Changes require	filing Form 642.		
10:19	9 Am					
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MAR 26 2						
By 2209	108 1CW	(
File Date			this report, including		firm that I have examine schedules and statement are true and correct.	
By:			Signature of Aprinoriza	ed Person	3/25/14 Date	
			Cathy Murray	U		
FOR SECRETARY OF STATE USE ONLY			Print or Type Name of Authorized Person			

Form No. 632 Revised: 01/2012