

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

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. 137294		2. Exact name of the limited liability company AA & TA, LLC					
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE BUSINESS					
5. Principal office address 68 RABBIT HILL ROAD			City CUMBERLAND	State RI	Zip 02864		
	LIMITED LIABILE	TY COMPANY AND	NAME OR TITLE OF CONTACT PER	RSON:			
Contact Name ARMANDO TENREIRO			Contact Title MANAGER				
Street Address 68 RABBIT HILL ROAD			City CUMBERLAND	State RI 02864	Zip		
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF A	PPLICABLE - DO NO	OT LIST MEMBERS		
Manager Name ARMANDO TENREIRO			Manager Name				
Street Address SAME AS ABOVE			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 RI	HODE ISLAND						
This information is current	tly of record in the	e Office of the Secr	retary of State. Changes require filir	ng Form 642.			
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FILED

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File Date	Under penalty 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.		
Check No	Fruando Terreiro	9-98-14	
Ву:	Signature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	ARMANDO TENREIRO Print or Type Name of Authorized Person		
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Form No. 632 Revised: 01/2012