

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 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.

3. State of Formation Rhode Island To Buy, Sell, Lease, Develop, Own and otherwise deal in Real Estate. 5. Principal office address 51 Tomahawk Trail South City Wakefield Ri Contact Title Contact Name Brian A. Lind Street Address 51 Tomahawk Trail South City Wakefield Ri City Wakefield Ri Contact Title Contact Title City Wakefield Ri City Wakefield Ri Contact Title State Ri City Wakefield Ri Contact Title Street Address 51 Tomahawk Trail South Manager Name Brian A. Lind Street Address 51 Tomahawk Trail South City Street Address Street Address 51 Tomahawk Trail South City State Ri City State Ri	1. Entity ID No.	2. Exact na	2. Exact name of the limited liability company Tri-Level Realty, LLC							
Rhode Island To Buy, Sell, Lease, Develop, Own and otherwise deal in Real Estate. 5. Principal office address 51 Tomahawk Trail South Contact Name Brian A. Lind Street Address 51 Tomahawk Trail South City Wakefield City Wakefield RI Zip 02879 City BOX FOR ATTACHMENT) Street Address 51 Tomahawk Trail South City Box For Address Street Address City State Zip Wakefield Manager Name Street Address Street Address Street Address City State Zip Manager Name Street Address City State Zip	129520		ricany, LLO							
Rhode Island To Buy, Sell, Lease, Develop, Own and otherwise deal in Real Estate. 5. Principal office address 51 Tomahawk Trail South Wakefield City Wakefield Contact Title Contact Title Contact Title City Wakefield State RI Contact Title City Wakefield State RI Contact Title City Wakefield RI City Wakefield RI City Wakefield RI City Wakefield Street Address Street Address Street Address City Wakefield City Wakefield Street Address Street Address Street Address City Wakefield State RI City State RI City State RI City State Street Address City State Street Address City State Street Address City State Street Address City State Street Address City State Street Address City State Street Address City State Street Address City State Zip City State Zip Street Address	3. State of Formation	4. Brief des	cription of the characte	er of business conducted in Rho	de Island					
Street Address Street Address State Ri Description Ri De	Rhode Island	To Buy,	To Buy, Sell, Lease, Develop, Own and otherwise deal in Real Estate.							
Contact Name	5. Principal office addres	. Principal office address			City State Zip					
Contact Title										
Street Address 51 Tomahawk Trail South City Wakefield State RI O2879 7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE DO NOT LIST MEMBER (x* BOX FOR ATTACHMENT) Manager Name Brian A. Lind Street Address 51 Tomahawk Trail South City Wakefield RI O2879 Manager Name City State Zip Manager Name Manager Name Street Address Street Address Street Address Street Address City State Zip Manager Name Street Address City State Zip City State Zip Manager Name	B: MAILING ADDRESS	OF LIMITED FABILITY	TY COMPANY AND N		PÉRSON:					
State Street Address Street Address Street Address Street Address State				Contact Title						
Manager Name Brian A. Lind Street Address 51 Tomahawk Trail South City Wakefield RI 02879 Manager Name Manager Name Street Address City State Zip Manager Name Manager Name Street Address City State Zip Manager Name City State Zip City State Zip Manager Name Street Address City State Zip City State Zip City State Zip						Zip 02879				
Street Address 51 Tomahawk Trail South City Wakefield Manager Name Manager Name Street Address City Manager Name Manager Name Street Address City State Zip Manager Name City Manager Name Street Address City State Zip City State Zip Manager Name Street Address	A BOX FOR ATTA	IS (NAMES AND ADD CHMENT)	PRESSES) OF THE L	IMITED LIABILITY COMPANY,	FAPPLICABLE - <u>DO</u>	NOT LET MEMBERS				
City State RI Zip O2879 City State Zip Manager Name Street Address Street Address City State Zip O2879 City State Zip Manager Name Manager Name Street Address Street Address	Brian A. Lind Street Address									
Wakefield RI 02879 Manager Name Manager Name Street Address Street Address City State Zip City State Zip										
Street Address Street Address City State Zip City State Zip	City Wakefield		Zip 02879	City	State	Zip				
City State Zip City State Zip	Manager Name			Manager Name						
State Zip	Street Address			Street Address						
SARESIDENT AGEN, IN RHÖDE ISLAND	City	State	Zip	City	State	Zip				
				** *** ** ** ** ** ** ** ** ** ** ** **						
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.	This information is curr	ently of record in the	e Office of the Secret	ary of State. Changes require	filing Form 642.					

FILED

OCT 2 1 2014

BY 317

		TOPE MODES	7.0	
Ella file				7
				erin dise
1.2				
Check	10		4 (He)	
· By				
5.4		w w	· 大概	
FORSE	CRETARY	TE CTATE	KELON	V
		100		
74	The Part of the Pa		20000	S. 750 3

Form No. 632 Revised: 01/2012 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 have in are true and correct.

Signature of Authorized Person

/0-/4-/9/ Date

Brian A. Lind

Print or Type Name of Authorized Person