

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.

1. Entity ID No. 792093		2. Exact name of the limited liability company 47 PELHAM, LLC							
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island							
Rhode Island	To acqui	To acquire and invest in such interests in real property							
5. Principal office address 47 Pelham Street			City Newport	State RI	Zip 02840				
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:					
Contact Name Catherine M. Curtis			Contact Title						
Street Address 28 Creighton Street			City Providence	State RI	^{Zip} 02906				
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD MENT)	RESSES) OF THE	LIMITED LIABILITY COMPANY, II	APPLICABLE - <u>Do</u>	NOT LIST MEMBERS				
Manager Name			Manager Name						
Street Address			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 R	HODE ISLAND								
This information is curren	itly of record in the	Office of the Secr	etary of State. Changes require	filing Form 642.					

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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 herein are true and correct.

Signature of Authorized Person

orino M. Curtio

Catherine M. Curtis
Print or Type Name of Authorized Person