

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. 693355	2. Exact name of the limited liability company Diamond Hill, LLC					
3. State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island real estate					
5. Principal office address 393 Reservoir Road			City Cumberland	State RI	Zip 02864	
	LIMITED LIABILI	Y COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:		
Contact Name Glenn Bruno		Contact Title				
Street Address 393 Reservoir Road			City Cumberland	State RI	Zip 02864	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO	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 RI	HODE ISLAND					
This information is curren	tly of record in the	Office of the Secr	etary of State. Changes require fi	ling Form 642.		

FILED

NOV 18 2014

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	Nach-	10.31.20	
Ву:	Signature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	Glenn Bruno		

Print or Type Name of Authorized Person

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Form No. 632 Revised: 01/2012