

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.		ne of the limited liabilit	y company				
541945	DG Prop	DG Properties, LLC					
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island					
RI	Real Esta	Real Estate					
5. Principal office address 301 Barnes Road		City Burrillville	State RI	Zip 02830			
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT P	PERSON:			
Contact Name David Graham			Contact Title Owner/Manager	* = :::::::::::::::::::::::::::::::::::			
Street Address 301 Barnes Road	Road		City Burrillville	State RI	Zip 02830		
7. LIST <u>all</u> managers ("X" box for attach		RESSES) OF THE LI	MITED LIABILITY COMPANY, I	FAPPLICABLE - DO	NOTELIST MEMBERS		
Manager Name David Graham			Manager Name				
Street Address 301 Barnes Road			Street Address				
City Burrillville	State RI	Zip 02830	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDEN AGENT IN R	Tree re refer to and a residence of the						
This information is currer	ntly of record in th	e Office of the Secret	tary of State. Changes require	filing Form 642.	<u> </u>		
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File Date		
Check No		
By:		
FOR SECRETA		

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 berein are true and correct.

Signature of Authorized Person

Date

David Graham

Print or Type Name of Authorized Person