

## 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

2015

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.	2. Exact nan	2. Exact name of the limited liability company				
126409	86 WE	86 WEST MAIN, LLC				
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island				
Rhode Island	the ow	the ownership and development of real property				
5. Principal office address 78 West Main Road		City Middletown	State <b>RI</b>	Zip <b>02840-0000</b>		
Contact Name  Valdemar Leite		Contact Title  Manager				
Street Address 78 West Main Road	 j		City Middletown	State <b>RI</b>	Zip <b>02840-0000</b>	
7. LIST ALL MANAGERS ( "X" BOX FOR ATTACH		RESSES) OF THE LIM	TED LIABILITY OCHRANY, F	APPLICABLE - BO N	OT LIST MEMBERS	
Manager Name Valdemar Leite		Manager Name				
Street Address 48 Sycamore Lane	:		Street Address			
City North Kingstown	State RI	Zip <b>02874</b>	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
A. RESIDENT AGENT IN R	HODE ISLAND		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
This information is curren	tly of record in the	Office of the Secretar	y of State, Changes require f	iling Form 642.		
RESIDENT AGENT IN R This information is curren		Office of the Secretar	y of State. Changes require f	iling Form 642.		

FILED
AUG 0 6 2015

RV 2684

File Onto	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	Vollage of	09/01/2015	
ang photos in the second control of the seco	Signature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	Valdemar Leite		
POR SECRETARY OF STATE USE, ORLY	Print or Type Name of Authorized Person		

Manager

Form No. 632 Revised: 01/2012

## UNANIMOUS CONSENT OF THE MEMBERS OF 86 WEST MAIN, LLC (2015)

The undersigned, being all of the Members of 86 WEST MAIN, LLC, a Rhode Island limited liability company, do hereby consent to ratify and affirm the following actions:

WHEREAS, the Joint Annual Meeting of the Managers and Members was held at the office of the Limited Liability Company on September 1, 2015 at 9:00 a.m., and

WHEREAS, the Members wish to elect Managers for the ensuing year in accordance with the Operating Agreement, and

WHEREAS, the Members entitled to vote request that the Limited Liability Company maintain a cash reserve in a sufficient sum for building repairs, maintenance of the company property and for the purchase and replacement of equipment, and for other contingencies, and

WHEREAS, the Members wish to approve and ratify all recorded contracts, commitments, bonuses, contributions, distributions, appointments and lawful company acts by the Managers since the last annual meeting.

## NOW THEREFORE BE IT

RESOLVED, the Members hereby elect the following Manager/Managers for the ensuing year:

Valdemar Leite

RESOLVED, the Limited Liability Company shall hereby maintain a cash reserve in a sufficient sum for building repairs, maintenance of the company property and for the purchase and replacement of equipment, and for other contingencies; and

RESOLVED, the Members hereby approve and ratify all recorded contracts, commitments, bonuses, contributions, distributions, appointments and lawful company acts by the Managers/Members since the last annual meeting.

**MEMBERS**:

The Valdemar Leite Revocable Trust - 2000

By: Valdemar Leite, Trustee

The Palmira B. Leite Revocable Trust - 2000

By: Palmira B. Leite, Trustee