

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 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. 163297	2 Exact name of the limited liability company 1302 ASSOCIATES, LLC					
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island To engage in any business permitted LLC's under the Act				
RI	10 engag	e in any busines	-		_	
5. Principal office address 23 RIMWOOD DRIVE			City SMITHFIELD	State RI	Zip 02917	
Contact Name RALPH MANGIARE	LLI. JR	e sergen i garan merisak kepada sergen ikun oleh cepada kepada sergen ikun oleh cepada kepada sergen ikun oleh Bada bagan sergen sergen diasan sergen ikun bada sergen ikun oleh sergen ikun oleh sergen ikun oleh sergen ikun	Contact Title MEMBER			
Street Address 23 RIMWOOD DRIVE			City SMITHFIELD	State RI	Zip 02917	
				eg verreive		
Manager Name RALPH MANGIARELLI, JR			Manager Name JOSEPH D. BRITO			
Street Address 23 RIMWOOD DRIVE			Street Address 180 GRANDVIEW AVENUE			
City SMITHFIELD	State RI	Zip 02917	City	State RI	02886	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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This information is curre	ntly of record in th	e Office of the Secre	tary of State. Changes require	filing Form 642.		

FILED

SEP 2 1 2015

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.

ture of Authorized

Date

RALPH MANGIAŘELLI JR.

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012