

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. 156078	2 Exact na Giardina	2. Exact name of the limited liability company Giardina Properties, LLC.				
3. State of Formation Rhode Island	4. Brief des Manager	cription of the character on the character on the character of the charact	of business conducted in Rhode Island f investment properties			
Principal office address 7 Sugar Hill Court		City Cranston	State RI	Zip 02921		
6. MAILING ADDRESS OF	F LIMITED LIABILIT	TY COMPANY AND NAM	ME OR TITLE OF CONTACT	PERSON:	1	
Contact Name Marissa Jean Giard	lina/Edward Ch	arles Giardina, Jr.	Contact Title Managers			
Street Address 7 Sugar Hill Court		City Cranston	State RI	Zip 02921		
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACK	(NAMES AND ADD	PRESSES) OF THE LIM	ITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name Edward Charles Giardina, Jr.			Manager Name Marissa Jean Giardina f/k/a Marissa Jean Germani			
Street Address 7 Sugar Hill Court			Street Address 7 Sugar Hill Cour	Street Address 7 Sugar Hill Court		
City Cranston	State RI	Zip 02921	City Cranston	State RI	^{Zip} 02921	
Manager Name	nager Name		Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN F	RHODE ISLAND				[
This information is curre	ntly of record in the	e Office of the Secretar	y of State. Changes require	filing Form 642.		
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SEP 3 0 2015

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. MANUAL CLARENTA 9-26-15		
Check No			
Ву:	Signature of Authorized Person Marissa Jean Grarouna	Date	
EOD SECRETARY OF STATE LISE ONLY	Edward Charles Graiding Ir		

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012