

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. 486037	Aloisio C	2. Exact name of the limited liability company Aloisio Group, LLC					
3. State of Formation Rhode Island	4. Brief desc Real esta	cription of the c	character of b	usiness conducted in Rho	de Island		
5. Principal office address 1200 Hartford Avenue				City Johnston	State RI	Zip 02919	
Contact Name Gregory F. Aloisio		w. nv		Contact Title Member			
Street Address P.O. Box 19508				City Johnston	State RI	Zip 02919	
State of the state							
Manager Name				Manager Name			
Street Address				Street Address	444		
City	State	Zip		City	State	Zip	
Manager Name				Manager Name			
Street Address				Street Address			
City	State	Zip		City	State	Zip	
This information is current	tly of record in the	Office of the	Secretary of	State Changes require	filing Form 642		
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	¥	mC		Under penalty of per this report, including and that all statement Signature of Authorize Gregory F. Alois	any accompanying some contained herein and the	rm that I have examined chedules and statements, re true and correct.	

Form No. 632 Revised: 01/2012