

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.	2. Exact name of the limited liability company 602 RESERVOIR AVENUE REALTY, LLC					
150337						
3. State of Formation RHODE ISLAND	4. Brief des Own and	Brief description of the character of business conducted in Rhode Island Own and manage real estate and any other lawful purpose.				
5. Principal office address 180 Cardinal Road			City Cranston	State RI	Zip 02920	
6. MAILING ADDRESS OF	LIMITED LIABILI	Y COMPANY AND	NAME OF TITLE OF CONTACT	PERSON:		
Contact Name Lucine Gyuleseryn			Contact Title Member			
Street Address 180 Cardinal Road			City Cranston	State RI	Zip 02920	
7. LIST ALL MANAGERS (I ("X" BOX FOR ATTACHI	NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - <u>Do</u>	Property and Albertage	
Manager Name None			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN RI	IODE ISLAND					
This information is current	ly of record in the	e Office of the Sec	etary of State. Changes require	filing Form 642.		

FILED

OCT 1 5 2015

File Date Check No FOR SECRETARY OF STATE USE ONLY 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. Signature of Authorized Person Date 10-11-15 Lucine Gyuleseryn

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012