

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 name of	the limited liability con	npany				
103971		•	IRO PROP	ERTIE	SLLC		
3. State of Formation	ate of Formation 4. Brief description of the character of business conducted in Rhode Island						
RHODE ISLAND REAL ESTATE							
5. Principal office address 4 OVERLOG	ok DR	VE	CityBRISTOL	State	Zip 2809		
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:							
Contact Name RAYMOND J. CARREIRO			Contact Title AGENT				
Street Address 4 OVERLOOK DRIVE			BRISTOL	State RI	2ip 0780 d		
7. LIST <u>ALL</u> MANAGERS (NAM ("X" BOX FOR ATTACHMEN	ES AND ADDRES	SES) OF THE LIMITE	LIABILITY COMPANY, IF APP	PLICABLE - DO N	OT LIST MEMBERS		
Manager Name RAYMOND J. CARREIRO, Jr.			Manager Name				
18 FOX HILL AVENUE			Street Address				
City BRISTO L	State I	Zip 02809	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN RHODE ISLAND							
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.							

FILED

OCT 1 5 2015

BY 411

BY					
	Under penalty of perjury, I declare and affirm that I have examined				
File Date	this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.				
Check No		5			
Ву:	Signature of Authorized Person Date	_			
FOR SECRETARY OF STATE USE ONLY	RAYMOND J. CARREIRO				
	Print or Type Name of Authorized Person				