

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 261

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					
188532	MERMAINS REALESTATE LLC.					
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island					
1251	REALESTATE					
5. Principal office address 254 Than ES	Stree		NEWP5VJ	State	Zip	
			ORTITLE OF CONTACT PERSO	<u> </u>	02840	
Contact Name		Contact Title				
Street Address	mm a		Pasident			
7 Young St.			GENERAL	State	Zip 02840	
7. LIST ALL MANAGERS (NAM	ES AND ADDRES	SES) OF THE LIMIT	ED LIABILITY COMPANY, IF APP	LICABLE DO 1	OT LIST MEMBERS	
("X" BOX FOR ATTACHMENT Manager Name			Manager Name			
		interrupt vane				
Street Address			Street Address			
City	State	Zip	City	State		
·				State	Zip	
Manager Name		-	Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN RHODE						
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.						
	Fil	LED			SECULIARY OF PARTIES OCT 19 PA	
	9 2015			D STAT		
BY On 258735						
Under penalty of perjury, I declare and affirm that I have examinthis report, including any accompanying schedules and statement and that all statements contained herein are true and correct. Check No. 4						
By:	APARTATA A POLITICA		Signature of Authorized Person		0 19 . 20 18 Date	
FOR SECRETARY OF STATE U		PAUL M. BOA	EDWAN -	SI.		
《中国》(1985年)	erece post		Print or Type Name of Author	ized Person		

Form No. 632 Revised: 01/2012