

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 DV XV, LLC				
691197					
3. State of Formation	Brief description of the character of business conducted in Rhode Island Commercial Property				
RI					
5. Principal office address 48 Hewett Street			City Warwick	State RI	Zip 02889
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:	
Contact Name Brian Bucci			Contact Title		
Street Address 48 Hewett Street			City Warwick	State RI	Zip 02889
7. LIST <u>ALL</u> MANAGERS (I ("X" BOX FOR ATTACH		PRESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - <u>DO</u>	NOT LIST MEMBERS
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
City					
8. RESIDENT AGENT IN RI	ODE ISLAND				

FILED 007 19 2015

Under senalty of perjury, 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. File Date 10/01/2015 Check No _ Signature of Authorized Person Date **Brian Bucci** FOR SECRETARY OF STATE USE ONLY

Print or Type Name of Authorized Person