

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 nan	2. Exact name of the limited liability company				
112285	MPDP Re	MPDP Realty, LLC				
3. State of Formation	Brief description of the character of business conducted in Rhode Island					
Rhode Island	Manage Real Estate					
5. Principal office address 2279 Plainfield Pike			City Johnston	State RI	Zip 02919	
6. MAILING ADDRESS D	FLIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE CE CONTACT	PERSON:		
Contact Name Doreen Pezza			Contact Title Member			
Street Address 2279 Plainfield Pike			City Johnston	State RI	Zip 02919	
//LISTALL MANAGERS	(NAMES AND ADI IMENT)	RESSES) OF THE	LIMITED LIABILITY COMPANY,	IF APPLICABLE - <u>DO</u>	(XO) I S) MEMBERS	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN	RHODE ISLAND					
		e Office of the Sec	retary of State. Changes require	e filing Form 642.		

FILED OCT 1 9 2015

Plie Date

Check No

By:

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 O

Date

Doreen Pezza

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012