State of Rhode Island and Providence Plantations Fee: \$50.0 Office of the Secretary of State				
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040				
Limited Liability Com Annual Report Filing Period: September 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2015				
1. ID No. <u>001022102</u>				
2. Exact Name of the Limited Liability Company Riverfront Capital, LLC				
3. State of Formation				
State: <u>RI</u>				
4. Brief Description of th Real estate financing				
5. Principal Office Addre	SS			
	4 BROADWAY OVIDENCE	State: <u>RI</u>	Zip: <u>02909</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: <u>STACEY FORLINI</u> Contact Title: <u>CONTROLLER</u> No. and Street: <u>334 BROADWAY</u>				
	<u>OVIDENCE</u>	State: <u>RI</u>	Zip: <u>02909</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name		Address	
	First, Middle, Last, Suffix		Address, City or Tow	n, State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
MARK VAN NOPPEN 334 BROADWAY PROVIDENCE, RI 02909				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				

Signed this 26 Day of October, 2015 at 9:21:55 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>MARK VAN NOPPEN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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