

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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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. <b>503416</b>	2. Exact name of the limited liability company 28 Farnum Pike, LLC.  4. Brief description of the character of business conducted in Rhode Island Real Estate rental					
3. State of Formation						
5. Principal office address 357 Putnam Pike			City Smithfield	State RI	Zip <b>02917</b>	
Contact Name Joseph Passaretti	antikan di kanangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan Pengangan pengangan	en particular en en la compaña de la factación de la compaña de la compaña de la compaña de la compaña de la c	Contact Title  Trustee			
Street Address 357 Putnam Pike			City Smithfield	State <b>RI</b>	Zip <b>02917</b>	
7. LIST ALL MANAGERS (N. ("X" BOX FOR ATTACHME	AMES AND ADDI	ESSE) OF THE	LIMITED LABILITY COMPANY, I	APPLICABLE - DO	NOT LIST NEMBERS	
Manager Name			Manager Name		<u> 20 Strant a 18 përsit e përportuaj, nga Sada ab d</u>	
Street Address			Street Address			
City	State	Žip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address		- "	
City	State	Zip	City	State	Zip 26	
RESIDENT AGENT IN RHO			etary of State. Changes require		5029	
FILED		onice of the second	ctary of State. Changes require	aing Form 642.	2: 00	
OCT 2 5 20						
BY CM 25954	ł7					
Pile Date			Under penalty of perj this report, including and that all statemen	any accompanying	irm that I have examined schedules and statements are true and correct.	
av.			Signature of Authorize	1 Person	) /8/2/// Date	
FOR SECRETARY OF STATE USE ONLY			Joseph Passare		240	
TOTAL CALL OF BIA	的复数印度 克诺瓦尔德克克尔		Print or Type Name of	Authorized Person		

Form No. 632 Revised: 01/2012