

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. 789715	2. Exact na Bike Inv	2. Exact name of the limited liability company Bike Investment Realty, LLC						
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island						
Rhode Island	Acquire	Acquire and invest in such interests in real property						
5. Principal office address 29 Sugar Maple Drive			City Coventry	State RI	Zip 02816			
8. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:				
Contact Name William Finnegan			Contact Title Member					
Street Address 29 Sugar Maple Drive			City Coventry	State RI	Zip 02816			
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADI	PRESSES) OF THE	LIMITED LIABILITY COMPANY	IF APPLICABLE - DO	NOTELIST MEMBERS			
Manager Name	A CONTRACTOR OF THE PARTY OF TH	And the second section of the s	Manager Name	The second of th	The state of the s			
Street Address	1		Street Address					
City	State	Zip	City	State	Zip			
Manager Name			Manager Name	<u> </u>	<u></u>			
Street Address			Street Address		8 36.			
City	State	Zip	City	State	Zip 22			
8. RESIDENT AGENT IN R	HODE ISLAND			The second state of the se				
This information is currer	ntly of record in the	e Office of the Seci	retary of State. Changes require	e filing Form 642.				
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BY Ca 259571

File Date	12!17	this report, including any accompanying sch	enalty of perjury, I declare and affirm that I have examined ont, including any accompanying schedules and statements afficient and correct.	
By:		Signature of Authorized Person	/ <i>O · / 8 · / -</i> Date	
FOR SECRETARY OF STATE USE ONLY		William Finnegan		
		Print or Type Name of Authorized Person	·	

Form No. 632 Revised: 01/2012