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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 name of the limited liability company
870805	**Fernandes Realty, LLC**
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island
RI	**Ownership of real estate**

5. Principal office address	City	State	Zip
41 Colleen Drive	**Seekonk**	**MA**	**02771**

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title		
Francisco Fernandes	**Manager**		
Street Address	City	State	Zip
41 Colleen Drive	**Seekonk**	**MA**	**02771**

7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
("X" BOX FOR ATTACHMENT) ☐

Manager Name			Manager Name		
Francisco Fernandes			**NONE**		
Street Address			Street Address		
41 Colleen Drive					
City	State	Zip	City	State	Zip
Seekonk	**MA**	**02771**			
Manager Name			Manager Name		
NONE			**NONE**		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. RESIDENT AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

FILED
OCT 27 2015
BY 1183

File 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.

X Francisco Fernandes
Signature of Authorized Person Date

Francisco Fernandes, Member
Print or Type Name of Authorized Person

Form No. 632
Revised 01/2010
SEQ0101201079375