

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.		e of the limited liabil				
930883	M Downe	y Real Estate, I				
3. State of Formation	4. Brief descr	iption of the charact	er of business conducted in Rhode	Island		
RHODE ISLAND	real est	real estate management				
5. Principal office address 71 Avice Street		City Narragansett	State RI	Zip 02882		
6. MAILING ADDRESS O	F LIMITED LIABILIT	Y COMPANY AND I	VAME OF TITLE OF CONTACT PE	RSON:		
Contact Name Matthew W. Downe	y		Contact Title Member			
Street Address 71 Avice Street			City Narragansett	State RI	Zip 02882	
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTAC		RESSES) OF THE I	LIMITED LIABILITY COMPANY, IF	APPLICABLE - <u>DO</u>	NOT LIST MEMBER	
Manager Name		Manager Name				
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	State	Zip	City Manager Name	State	Zip	
	State	Zip		State	Zip	
Manager Name Street Address	State	Zip Zip	Manager Name	State	Zip	
City Manager Name Street Address City 8. RESIDENT AGENT IN	State		Manager Name Street Address			

OCT 2 6 2015

File Date	
File Date	
Check No	
Check No	

	VA ** (0 X0,

Ву:	
Ву:	

Form No. 632 Revised: 01/2012 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

Walten Signature of Authorized Person

Matthew W. Downey, Member

Print or Type Name of Authorized Person