

## 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. 516377	<sup>2</sup> Exact nar J & G Re	2 Exact name of the limited liability company 3 & G Realty, LLC					
3. State of Formation	4. Brief desc Real Esta	Brief description of the character of business conducted in Rhode Island     Real Estate Rental					
RI							
5. Principal office address 357 Putnam Pike			City CPA	State <b>RI</b>	Zip <b>02917</b>		
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:			
Contact Name Joseph Passaretti, CPA		Contact Title					
Street Address 357 Putnam Pike			City Smithfield	State RI	Zip <b>02917</b>		
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, I	F APPLICABLE - DO	NOT LIST MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN F	RHODE ISLAND		L		··· 1		
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OCT 2 6 2015

File Date	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.		
Check No	John Jacona	10/23/19	
By:	\$ighature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	John Iacona		
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012