

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. 116292	Exact name of the limited liability company Tiogue Avenue, LLC				
3. State of Formation	Brief description of the character of business conducted in Rhode Island Real estate.				
Rhode Island					
5. Principal office address 22 Tiogue Avenue			City West Warwick	State RI	Zip 02893
6. MAILING ADDRESS OF	LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT PE	RSON:	
Contact Name Kenneth A. Rossi			Contact Title Member		
Street Address 22 Tiogue Avenue			City West Warwick	State RI	Zip 02893
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH	(NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	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			<u> </u>	
This information is curren	ntly of record in th	e Office of the Sec	retary of State. Changes require fil	ing Form 642.	

		Under penalty of perjury, I declare and affirm that I have examined
File Date	OCT 2 9 2015	this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
Check No	36228	1/10-7-15
By:		Signature of Authorized Porson Date
FOR SECRETARY OF STATE USE ONLY		Kenneth A. Rossi

Print or Type Name of Authorized Person