

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. 584769	Presidio Capital management, LLC						
3. State of Formation	Brief description of the character of business conducted in Rhode Island Real Estate						
RI	near Esta	ite					
5. Principal office address 1092 Great Road			City Lincoln	State RI	Zip 02865		
	reditably	decompany and	MAME OF SHILL OF CONTACTOR	HSON:	THE CONTRACT OF THE STATE OF		
Contact Name K. Erik Wallin			Contact Title Registered Agent				
Street Address 4160 Old Post Road, Suite 101			City Charlestown	State RI	Zip 02813		
7. LISTALL MANAGERS (NAM LYT. BOX FOR ATTACHMEN		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - <u>Do</u>	NOT LIST MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address	et Address			Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name		MACAGINE		
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
A RESIDENT AGENT IN RHOD	EISLAND	_					
This information is currently or	f record in the	Office of the Secr	etary of State. Changes require fi	ling Form 642.			

NOV 1 6 2015

File Date	Under penalty of perjury, I declare and this report, including any accompanying and that all statements contained here	ng schedules and statements
Check No	- Diff	11/12/13
	Signature of Authorized Person	Date
SOP SPECIALLY OF STATE LINE ONLY	57EVEN 11LIPP	<u>'/</u>
	Print or Type Name of Authorized Person	ı

Form No. 632 Revised: 01/2012