

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					
967708	Hyatt Str	Hyatt Street Investments, LLC					
3. State of Formation		Brief description of the character of business conducted in Rhode Island					
Rhode Island	Any lawf	ul business wh	tsoever permitted under law				
5. Principal office address 35 Tripoli Street			City Providence	State RI	Zip 02909		
6. MAILING ADDRESS C	F LIMITED LIABILIT	Y COMPANY ÁND	NAME OR TITLE OF CONTACT P	ERSON:			
Contact Name Lisa L. Kelly			Contact Title				
Street Address 35 Tripoli Street			City Providence	State RI	Zip 02909		
7. LIST <u>ALL</u> MANAGER ("X" BOX FOR ATTAC		RESSES) OF THE	LIMITED LIABILITY COMPANY, II	APPLICABLE - <u>Do</u>	NOT LIST MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN	RHODE ISLAND		<u></u>				
		e Office of the Sec	retary of State. Changes require	filing Form 642.			

	FILEU			
	NOV 1 6 2015	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements,		
File Date	1412	and that all statements contained herein are true and correct.		
Check NoBY_	1012	Juan Telly 11-1029	15	
Bv:		Signature of Authorized Person Date		
		Lisa L. Kelly		
FOR SECRETARY OF STATE USE ONLY		Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012