

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 .	2. Exact name of the limited liability company Lofty Enterprises, LLC						
124682		,						
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island						
Rhode Island	Purchas	Purchase, own and manage real estate						
Principal office address 108 Main Street		City Pawtucket	State RI	Zip 02860				
6. MAILING ADDRESS OF	LIMITED LIABILIT	TY COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:	The state of the s			
Contact Name Jason R. Thompson	NAMES AND ADDRESSES) OF THE	Contact Title Member						
Street Address 109 11th Street			City Providence	State RI	Zip 02906			
7. LIST <u>ALL</u> MANAGERS (I ("X" BOX FOR ATTACHN		RESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBERS			
Manager Name		Manager Name						
Street Address			Street Address	Street Address				
City	State	Zîp	City	State	Zìp			
Manager Name			Manager Name		<u> </u>			
Street Address			Street Address					
City	State	Zip	City	State	Zip			
8. RESIDENT AGENT IN RI	IODE ISLAND							
This information is current	ly of record in the	e Office of the Seci	retary of State. Changes require f	iling Form 642.				
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File Date Check No	FILED NOV 2 5 2015	Under penalty of perjury, I declare and at this report including any accompanying and that a statements contained herein	schedules and statements,	
By: RV	24410 D	Signature of Authorized Rerson	Date	
FOR SECRETARY OF STATE USE ONLY		Jason R. Thompson, Member		
- FOR SECRETARY OF STATE USE UNLY		Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012