

## 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. 000977366		me of the limited liab alty, LLC	ility company							
State of Formation	1	Brief description of the character of business conducted in Rhode Island     Real Estate Investments								
5. Principal office address 298 Meshanticut Valley Parkway			City Cranston	State RI	Zip <b>02920</b>					
6. MAILINGTADDRESS OF L	IMITED LIABILI	TY COMPANY AND	NAME OR STILLE OF CONTACT	PERSON						
Contact Name Vark Markarian			Contact Title  Managing Member	er						
Street Address 298 Meshanticut Valle	ey Parkway		City Cranston	State RI	Zip <b>02920</b>					
7. LIST ALL MANAGERS (N ("X" BOX FOR ATTACHM	ÁMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY	IFAPPLICABLE DO I	NOT LIST MEMBERS					
Manager Name			Manager Name	Manager Name						
Street Address			Street Address							
Citv	State	Zip	City	State	Zip					
Manager Name			Manager Name							
Street Address			Street Address							
City	State	Zip	City	State	Zip					
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This information is current	y of record in the	e Office of the Secr	etary of State. Changes require	filing Form 642.	<u> </u>					
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Form No. 632 Revised: 01/2012 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.

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Signature of Authorized Person

Date

Vark Markarian

Print or Type Name of Authorized Person