

Annual Report for the year: 2015
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number	2. Exact name of the Limited Liability Company						
147908	One Group Rhode Island, LLC						
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island						
Rhode Island	Real Estate						
5. Principal Office Address			City	State	Zip		
575 Chadbourne Ave.			Millbrae	CA	94030		
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Antoni Kutulas			Contact Title Manager				
Street Address 575 Chadbourne Ave.			City Millbrae	State CA	^{Zip} 94030		
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Antoni Kutulas			Manager Name				
Street Address 575 Chadbourne Ave.			Street Address				
^{City} Millbrae	State CA	^{Zip} 94030	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	<u> </u>			Check the box to in	ndicate an attachment		
8. Resident Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 642.							
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.							
Name of Authorized Person				Date			
Antoni Kutulas				June 1	6, 2016		
Signature of Authorized Person		SIGN DO	CUMENT HERE				
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov