State of Rhode Island and Providence Plantations	2016 SEP	SECRETARION OF THE PROPERTY OF
Department of State - Business Services Division	ω	
lages	P	
Annual Report for the year: <sup>2015</sup>	8: 1	MIS.
Limited Liability Company		771
<ul> <li>→ Filing period: September 1 - November 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by December 1.</li> </ul>		
7 i charty. Additional \$25.50 ice in form is not filed by December 1.		

7 i Sharry. Naditional \$20.00							
1. Entity ID Number	2. Exact name of the Limited Liability Company						
541949	Vanderbilt International Properties Ltd LLC						
3. NAICS Code	4. Brief descr	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental a	A real estate brokerage, marketing, sales and public relations company to provide a service to individual property owners and developers						
5. State of Formation							
RI							
6. Principal Office Address	•		City	State	Zip		
19 Brown & Howard Wharf			Newport	RI	02840		
7. Mailing Address of Limited Lia	bility Company	and Name or Title					
Contact Name Linda S McKay		Contact Title Comptroller					
Street Address 19 Brown & Howard Wharf			City Newport	State RI	<sup>Zip</sup> 02840		
8. List ALL managers (names ar	nd addresses)	of the Limited Liab	oility Company, IF APPLICA	ABLE - DO NOT LIST ME	MBERS		
Manager Name Stacie E Mills		Manager Name Peter J de Savary					
Street Address 19 Brown & Howard Wharf			Street Address 19 Brown & Howarad Wharf				
City Newport	State RI	<sup>Zip</sup> 02840	City Newport	State RI	<sup>Zip</sup> 02840		
Manager Name			. Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				Check the box to ind	cate an attachment		
9. Resident Agent in Rhode Islan	d, This informati	ion is currently of rec	cord with the Department of St	tate. Changes require filing F	Form 642.		
Under penalty of perjury, I decistatements, and that all statem				ng any accompanying s	chedules and		
Name of Authorized Person			Date	Date			
Linda S McKay			09/12/2016	09/12/2016			
Signature of Authorized Person SIGN DOCUMENT HERE							
Carlo II Carlo II I I	- recy						

MAIL TO:

**Division of Business Services** 

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

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

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