	State of Rhode Island and Office of the Sec		ions Fee: \$50
	Division Of Bus	iness Services	
	148 W. Riv		
	Providence RI		
HOPE	(401) 222	2-3040	
imited Liability	Company		
Annual Report			
iling Period: Septem	ber 1 - November 1		
	I.G.L. 7-16-66(d), each limited liability		
	t within thirty (30) days after the time p t to a penalty fee of \$25.00.	rescribed by law (R.I.G.L	. 7-
ANNUAL REPORT Y	EAR: <u>2016</u>		
1. ID No. <u>0009</u>	10527		
2. Exact Name of t	he Limited Liability Company $\ \underline{\mathrm{MO}}$	NT REAL PARTNERS	LLC
3. State of Formati	on		
State: MA			
	ARTICLE		
Using the following N			usiness
Using the following N	ARTICLE		usiness.
Using the following N		hat best describes your b	usiness.
NAICS Code	IAICS codes, please select the code t	hat best describes your b	5 <u>5</u>
NAICS Code		hat best describes your b	5 <u>5</u>
NAICS Code 4. Brief Description	VAICS codes, please select the code t	hat best describes your b	5 <u>5</u>
NAICS Code 4. Brief Description	VAICS codes, please select the code t	hat best describes your b	5 <u>5</u>
NAICS Code	AICS codes, please select the code t of the Character of the Business W	hat best describes your b	5 <u>5</u>
NAICS Code 4. Brief Description <u>COMMERCIAL B</u> 5. Principal Office A	Address	hat best describes your b	5 <u>5</u>
NAICS Code 4. Brief Description COMMERCIAL B 5. Principal Office A No. and Street:	AICS codes, please select the code t of the Character of the Business W	hat best describes your b	5 <u>5</u>
NAICS Code 4. Brief Description <u>COMMERCIAL B</u> 5. Principal Office A No. and Street: City or Town:	Address 91 HILL STREET SHREWSBURY	hat best describes your b	<u>53</u> cted in Rhode Island Country: <u>USA</u>
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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

STEVE CONTI 1862 SMITH STREET NORTH PROVIDENCE, RI 02911

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 14 Day of September, 2016 at 8:10:36 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DEEPAK WADHWA

Signature of Authorized Person

Form No. 632 Revised 09/07

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