



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016

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.

1. Entity ID Number <u>1340846</u>		2. Exact name of the Limited Liability Company <u>Roberto And Hines, LLC</u>			
3. NAICS Code <u>531110</u>		4. Brief description of the character of business conducted in Rhode Island <u>Rents out office space And Residential Space in one Location</u>			
5. State of Formation <u>Rhode Island</u>					
6. Principal Office Address <u>30 Holley St</u>		City <u>WAKEFIELD</u>		State <u>RI</u>	Zip <u>02879</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Joseph P. Matoney Jr</u>			Contact Title <u>Partner</u>		
Street Address <u>30 Holley St</u>		City <u>WAKEFIELD</u>		State <u>RI</u>	Zip <u>02879</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City		State	City		State Zip
Manager Name			Manager Name		
Street Address			Street Address		
City		State Zip	City		State Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with 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 <u>Joseph P. Matoney Jr</u>				Date <u>9/6/2016</u>	
Signature of Authorized Person <u>Joseph P. Matoney Jr</u>				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov

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