

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

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.

135826	Younes	Realty, LLC				
State of Formation Rhode Island	4. Brief des Real Es	Brief description of the character of business conducted in Rhode Island Real Estate.				
5. Principal office address 2138 Mendon Road			City Cumberland	State RI	Zip 02864	
MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT P	ERSON:		
Maria C. Younes			Contact Title Member			
treet Address 2138 Mendon Road			City Cumberland	State RI	Zip 02864	
LIST <u>ALL</u> MANAGERS (("X" BOX FOR ATTACH	NAMES AND ADI MENT)	DRESSES) OF THE	LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO	NOT LIST MEMBE	
lanager Name			Manager Name			
treet Address			Street Address			
ity	State	Zip	City	State	Zip	
anager Name			Manager Name			
	treet Address			Street Address		
reet Address						
reet Address	State	Zip	City	State	Zip	
		Zip	City	State	Zip	

File Date SEP Check No. By: BY FOR SECRETARY OF STATE USE ONLY	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. Signature of Authorized Person Date Maria C. Younes, Member
	Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012