

State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

R.I. DEPT. OF STATE BUG SVOS DIV

2016 SEP 20 PH 1:53

→ 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	2. Exact name of the Limited Liability Company				
871415	70 Burkin Krive LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
53					
5. State of Formation	Rental Property				
R.I.	pen		TO MEN IS		
6. Principal Office Address	-		City	State	Zip
70 Durkin Drive			Naw	R-I	C8850
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name DAWA DILLUM			Contact Title  Man ager		
Street Address 5 NAWAGASTELL CJJ.+			N.A.	State	Zip 07882
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	Zip (	City	State	Zip
Manager Name	Mr.		Manager Name		
Street Address V			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
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				Date	
Dawn Dillon				9-20	0-16
Signature of Authorized Person					

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 C

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