	State of Rhode Island and Pro Office of the Secreta		DNS Fee: \$50.0
	Division Of Business	Services	
	148 W. River S	treet	
	Providence RI 0290		
HOPE	(401) 222-30	40	
_imited Liability Con	npany		
Annual Report			
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability com		
o file its annual report with 16-66(b&c)) is subject to a	nin thirty (30) days after the time presc	ribed by law (R.I.G.L.)	7-
· · · ·			
ANNUAL REPORT YEAR	: 2016		
1. ID No. <u>00084960</u>	<u>14</u>		
2. Exact Name of the L	imited Liability Company <u>PBT RE</u>	ALTY, LLC	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
	· · · · · · · · · · · · · · · · · · ·		
Using the following NAIC	S codes, please select the code that b	est describes your bus	siness.
NAICS Code		6	53
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MICHAEL TIKOIAN 144 WESTMINSTER STREET PROVIDENCE, RI 02903

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

Signed this 21 Day of September, 2016 at 2:30:25 PM 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 MICHAEL M TIKOIAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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