	State of Rhode Island and Prov Office of the Secretar		Fee: \$50.00
	Division Of Business S	Services	
	148 W. River Str		
	Providence RI 02904	-2615	
HOPE	(401) 222-3040)	
Limited Liability Compa Annual Report Filing Period: September 1 - N			
	16-66(d), each limited liability company f days after the time prescribed by law (R 5.00.		
ANNUAL REPORT YEAR: 2	<u>.016</u>		
1. ID No. <u>000333763</u>			
2. Exact Name of the Limi	ted Liability Company DRH Passport	t <u>LLC</u>	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
Using the following NAICS co	odes, please select the code that best de	escribes your business.	
NAICS Code		<u>6</u> <u>81</u>	
4. Brief Description of the	Character of the Business Which is A	ctually Conducted in Rhode Islar	nd
ANY LAWFUL BUSINES	<u>3S</u>		
5. Principal Office Address			
No. and Street: C/O CT CO	DRPORATION SYSTEM		
	RANS MEMORIAL PARKWAY, SU	ITE 7A	
City or Town: EAST PRO		State: <u>RI</u> Zip: <u>02914</u>	Country: <u>USA</u>
6. Mailing Address of Limit	ted Liability Company and Name or T	itle of Contact Person:	
Contact Name: DEBORAH	HICKS Contact Title:		
No. and Street: C/O CT CC			
	RANS MEMORIAL PARKWAY, SU		
City or Town: EAST PRC		State: <u>RI</u> Zip: <u>02914</u> 0	Jountry: <u>USA</u>
7. Name and Address of Ea DO NOT LIST MEMBERS	ach Manager of the Limited Liability (Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST PROVIDENCE</u>, <u>RI</u> 02914

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 3:14:26 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 <u>DEBORAH HICKS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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