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	State of Rhode Island and Providence PlantationsForOffice of the Secretary of State	ee: \$50.0
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
HOPE	(401) 222-3040	
imited Liability Co	ompany	
Annual Report Filing Period: Septembel	r 1 - November 1	
	G.L. 7-16-66(d), each limited liability company failing or refusing vithin thirty (30) days after the time prescribed by law (R.I.G.L. 7-	
	a penalty fee of \$25.00.	
ANNUAL REPORT YEA	AR : <u>2016</u>	
1. ID No. <u>0009116</u>	<u>633</u>	
2. Exact Name of the	Limited Liability Company VP funding group LLC	
3. State of Formation	1	
State: RI		
	ARTICLE III	
	ARTICLE III	
Using the following NAI	ARTICLE III ICS codes, please select the code that best describes your business.	
Using the following NAI		
NAICS Code	ICS codes, please select the code that best describes your business. $\underline{6} \qquad \underline{81}$	
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

VAL BRIGGS 62 THELMA STREET NORTH PROVIDENCE, RI 02911

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 7:46:30 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>VANESSA PONTARELLI</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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