

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:	2016
Limited Liability Company	

- → 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 7969 4	2. Exact I	2. Exact name of the Limited Liability Company Lea LLC					
3. NAICS Code		Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental and	Rentals						
5. State of Formation]						
Rhode Island							
6. Principal Office Address	-		City	State	Zip		
2363 Post Rd			Warwick	Ri	02886		
7. Mailing Address of Limited Lia	ability Comp	any and Name c	or Title of Contact Person				
Contact Name Richard L. Johnston				Contact Title Managing Member			
Street Address 2363 Post Rd		City Warwick	State RI	Zip 02886			
8. List ALL managers (names ar	nd addresse	s) of the Limited	Liability Company, IF APPLIC/	ABLE - DO NOT LIST	MEMRERS		
Manager Name	1			Manager Name			
Street Address		Street Address	Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address							
	<u>-</u>		Street Address	Street Address			
City	State	Zip	City	State	Zip		
				Check the box to it	ndicate an attachment		
9. Resident Agent in Rhode Island	J. This inform	nation is currently c	of record with the Department of St	oto Chongos versión Eli	-		
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Name of Authorized Person				Date 4	.) .		
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Signature of Authorized Person	Qc	2,000					
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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 23 2016 BY 13020

