State of Rhode Island and Providence Plantations Department of State - Business Services Division Annual Report for the year: 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 2. Exact name of the Limited Liability Company PBF LLC

4. Brief description of the character of business conducted in Rhode Island BLD RENTAL CRANSTON 02920 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title 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 Manager Name ...anager Name Street Address 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 Signature of Authorized Person SIGN DOCUMENT HERE

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 54605