	State of Rhode Island and Providence Plantations Office of the Secretary of State	Fee: \$50
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615 (401) 222-3040	
HOPE	(+01) 222-30+0	
imited Liability C	Company	
Annual Report iling Period: Septemb	per 1 - November 1	
	G.L. 7-16-66(d), each limited liability company failing or refusing within thirty (30) days after the time prescribed by law (R.I.G.L. 7-	
6-66(b&c)) is subject :	to a penalty fee of \$25.00.	
ANNUAL REPORT YE	EAR: <u>2016</u>	
1. ID No. <u>00056</u>	<u>0684</u>	
2. Exact Name of th	ne Limited Liability Company Camaco Holdings, LLC	
3. State of Formatio	on	
5. State of Formatio		
State: <u>RI</u>		
	ARTICLE III	
State: <u>RI</u>	ARTICLE III AICS codes, please select the code that best describes your business.	
State: <u>RI</u> Using the following NA	AICS codes, please select the code that best describes your business.	
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State: <u>RI</u> Using the following NA NAICS Code 4. Brief Description of HOLDING REAL E 5. Principal Office Ad No. and Street: City or Town: 6. Mailing Address of Contact Name: Con No. and Street: City or Town: 7. Name and Address	AICS codes, please select the code that best describes your business. 81 of the Character of the Business Which is Actually Conducted in Rho ESTATE. ddress 2046 MAIN ROAD TIVERTON State: RI zip: 02878 Country of Limited Liability Company and Name or Title of Contact Person: ntact Title: 2046 MAIN ROAD TIVERTON State: RI Zip: 02878 Country of Limited Liability Company and Name or Title of Contact Person: ntact Title: 2046 MAIN ROAD TIVERTON State: RI Zip: 02878 Country of Lamited Liability Company and Name or Title of Contact Person: ntact Title: 2046 MAIN ROAD TIVERTON State: RI Zip: 02878 Country of Each Manager of the Limited Liability Company, if Applicable.	y: <u>USA</u>

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JUSTIN S. HOLDEN, ESQ. 86 FALCON RIDGE DRIVE EXETER, RI 02822

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

Signed this 24 Day of September, 2016 at 7:25:34 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>KIMBERLY OBRIEN</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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