(B)	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.

A F-St ID N	T = -						
1. Entity ID Number	2. Exact name of the Limited Liability Company						
535568	MCM Properties, LLC						
3. NAICS Code	NAICS Code 4. Brief description of the ch			aracter of business conducted in Rhode Island			
53 - Real Estate and Rental and	Acquiring, developing, owning, leasing, mortgaging, operating and disposing of real property of						
5. State of Formation	interest therein, wherever located						
Rhode Island							
6. Principal Office Address			City	State	Zip		
1445 Main Road		Tiverton	RI	02878			
7. Mailing Address of Limited Lia	bility Compar	ny and Name or Title	e of Contact Person				
Contact Name Norman MacLeod,	, HI		Contact Title				
Street Address 1445 Main Road			City Tiverton	State RI	^{Zip} 02878		
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	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		-	<u> </u>	Check the box to in	ndicate an attachment		
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filling 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		·	Date	/			
Norman MacLeod, III			2/18/16				
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 **FILED**

SEP 29 2016 DS

""FORM 632 - Revised: 08/2016