State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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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 **149698**	2. Exact name of the Limited Liability Company **PF Investment Group LLC**		
3. NAICS Code 52 - Finance and Insurance	4. Brief description of the character of business conducted in Rhode Island **investment and holding company**		
5. State of Formation **Rhode Island**			
6. Principal Office Address **97 John Clarke Road**	City **Middletown**	State **RI**	Zip **02842**
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name **Brady M. Schofield**	Contact Title		
Street Address **97 John Clarke Road**	City **Middletown**	State **RI**	Zip **02842**

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

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 **Brady M. Schofield**	Date 9/13/16
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 30 2016
BY CK 11038

FORM 632 - Revised: 08/2016