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					

→ Penalty: A	ditional \$25.00 fee if form is not filed by Decen		nber 1.		

1. Entity ID Number	2. Exact name of the Limited Liability Company							
163215	Bell Realty Group, LLC							
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island							
55	Real estate							
5. State of Formation								
RI								
6. Principal Office Address			City	State	Zip			
P.O. Box 362/ 2 School St. Unit 319			Albion	RI	02802			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Contact Name Anthony Marotti, Jr.			Contact Title member					
Street Address same as above			City	State	Zip			
8. List ALL managers (names an	d addresses) of	the Limited Liabil	ity Company, IF APPLICABLE -	DO NOT LIST ME	MBERS			
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			
		- L	Ch	eck the box to ind	cate an attachment			
9. Resident Agent in Rhode Islan	d. This informatio	n is currently of reco	ord with the Department of State. Ch	anges require filing F	orm 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				
Anthony Marotti, Jr.				9/26/16				
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

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BY