



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000946040		2. Exact name of the limited liability company Insurance Recovery Legal Associates, LLC			
3. State of Formation MA		4. Brief description of the character of business conducted in Rhode Island Law Firm			
5. Principal office address 959 Concord Street, Ste. 200		City Framingham	State MA	Zip 01701	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Rita A. Leazott		Contact Title Controller			
Street Address 959 Concord Street, Ste. 200		City Framingham	State MA	Zip 01701	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name W. Frederick Uehlein		Manager Name			
Street Address 959 Concord Street, Ste. 200		Street Address			
City Framingham	State MA	Zip 01701	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

OCT 06 2016

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By: _____

FOR SECRETARY OF STATE USE ONLY

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.

W. Frederick Uehlein 09/20/2016
Signature of Authorized Person Date

W. Frederick Uehlein
Print or Type Name of Authorized Person