	State of Rhode Island and Providence Plantations Fee: Office of the Secretary of State	: \$50
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
HOPE	(401) 222-3040	
imited Liability	Company	
Innual Report	nber 1 - November 1	
	R.I.G.L. 7-16-66(d), each limited liability company failing or refusing rt within thirty (30) days after the time prescribed by law (R.I.G.L. 7-	
	ct to a penalty fee of \$25.00.	
ANNUAL REPORT	YEAR: <u>2016</u>	
I. ID No . <u>0010</u>	070282	
2. Exact Name of	the Limited Liability Company <u>35 Summit, LLC</u>	
3. State of Format	tion	
State: <u>RI</u>		
Using the following	ARTICLE III NAICS codes, please select the code that best describes your business.	
	NAICS codes, please select the code that best describes your business.	
Using the following I		
NAICS Code	NAICS codes, please select the code that best describes your business.	Ind
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NAICS Code 4. Brief Description <u>REAL ESTATE</u> 5. Principal Office No. and Street:	NAICS codes, please select the code that best describes your business.	Ind
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NAICS Code 4. Brief Description <u>REAL ESTATE</u> 5. Principal Office No. and Street: City or Town:	NAICS codes, please select the code that best describes your business.	Ind
NAICS Code 4. Brief Description <u>REAL ESTATE</u> 5. Principal Office No. and Street: City or Town: 6. Mailing Address	NAICS codes, please select the code that best describes your business. 6 53 In of the Character of the Business Which is Actually Conducted in Rhode Isla Address 164 9TH STREET PROVIDENCE State: RI Zip: 02906 Country: USA s of Limited Liability Company and Name or Title of Contact Person:	Ind
NAICS Code 4. Brief Description <u>REAL ESTATE</u> 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name: <u>Mi</u>	NAICS codes, please select the code that best describes your business. 6 53 n of the Character of the Business Which is Actually Conducted in Rhode Isla Address <u>164 9TH STREET</u> <u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02906</u> Country: <u>USA</u>	Ind
NAICS Code 4. Brief Description <u>REAL ESTATE</u> 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name: <u>Mi</u> No. and Street:	NAICS codes, please select the code that best describes your business. 6 53 In of the Character of the Business Which is Actually Conducted in Rhode Isla Address 164 9TH STREET PROVIDENCE State: RI Zip: 02906 Country: USA s of Limited Liability Company and Name or Title of Contact Person: ICHAEL LESHINSKY Contact Title: OWNER	
NAICS Code 4. Brief Description REAL ESTATE 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name: Mi No. and Street: City or Town:	NAICS codes, please select the code that best describes your business. 6 53 n of the Character of the Business Which is Actually Conducted in Rhode Isla Address 164 9TH STREET PROVIDENCE State: RI 2 of Limited Liability Company and Name or Title of Contact Person: 1CHAEL LESHINSKY Contact Title: OWNER 164 9TH STREET PROVIDENCE State: RI 2 of Limited Liability Company and Name or Title of Contact Person: 1CHAEL LESHINSKY Contact Title: OWNER 164 9TH STREET PROVIDENCE State: RI Zip: 02906 Country: USA	
NAICS Code 4. Brief Description <u>REAL ESTATE</u> 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name: <u>Mi</u> No. and Street: City or Town: 7. Name and Address	NAICS codes, please select the code that best describes your business. 6 53 n of the Character of the Business Which is Actually Conducted in Rhode Isla Address 164 9TH STREET PROVIDENCE State: RI 2 of Limited Liability Company and Name or Title of Contact Person: 1CHAEL LESHINSKY Contact Title: OWNER 164 9TH STREET PROVIDENCE State: RI 2 of Limited Liability Company and Name or Title of Contact Person: 1CHAEL LESHINSKY Contact Title: OWNER 164 9TH STREET PROVIDENCE State: RI Zip: 02906 Country: USA	

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

TODD E. MCNAMARA, ESQ. 1177 GREENWICH AVENUE WARWICK, RI 02886

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

Signed this 14 Day of October, 2016 at 4:29:40 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 MICHAEL LESHINSKY

Signature of Authorized Person

Form No. 632 Revised 09/07

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