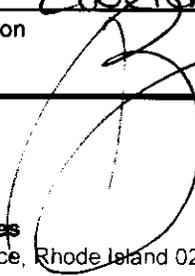




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

1. Entity ID Number 81873	2. Exact name of the Limited Liability Company AAD, LLC		
3. NAICS Code 53 - Real Estate and Rental and	4. Brief description of the character of business conducted in Rhode Island Real estate holding company.		
5. State of Formation Rhode Island			
6. Principal Office Address 1056 Hope Street	City Providence	State RI	Zip 02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Dr. John Zwetchkenbaum		Contact Title Member	
Street Address 1056 Hope Street		City Providence	State RI Zip 02906
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name Dr. John Zwetchkenbaum		Manager Name	
Street Address 1056 Hope Street		Street Address	
City Providence	State RI	Zip 02906	City State Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City State Zip
Check the box to indicate an attachment <input type="checkbox"/>			
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 John Zwetchkenbaum, MD		Date 10/7/16	
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
 OCT 14 2016
 BY 2206 DS