State of Rhode Island and Providence Plantations  Department of State - Business Services Division	23 x0 30 E. 30 E. 30 E. 30 E.
Annual Report for the year: 2016	1 3 3 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5
Limited Liability Company	
→ Filing period: September 1 - November 1	ro di A
→ Filing Fee: \$50.00	
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.	- <del> </del>

1. Entity ID Number	2. Exact name of the Limited Liability Company					
552170	DelFarno Realty, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental and	To engage in investment, ownership and development of real estate.					
5. State of Formation						
Ri						
6. Principal Office Address			City	State	Zip	
461 Angel Road			Lincoln	RI	02865	
7. Mailing Address of Limited Lia		and Name or Title	of Contact Person		· · · · · · · · · · · · · · · · · · ·	
Contact Name Agostino DelFarno, Jr.			Contact Title Authorized Person			
Street Address 461 Angel Road			City Lincoln	State RI	<sup>Zip</sup> 02865	
8. List ALL managers (names ar	d addresses) o	f the Limited Liabi	lity Company, IF APPL	ICABLE - 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 Islan	d. This information	on is currently of reco	ord with the Department o	f State. Changes require fi	ing Form 642.	
Under penalty of perjury, I deci statements, and that all statem				uding any accompanyi	ng schedules and	
Name of Authorized Person			Date	Date		
Agostino DelFarno, Jr.	$\mathcal{A}$	5				
Signature of Authorized Person	A	SIGN DOC	CUMENT 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 C OCT 17 2016

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