

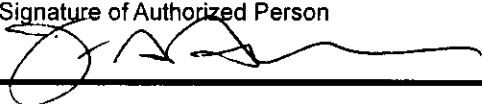


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

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BUSINESS DIV.
2016 OCT 18 PM 2:47

1. Entity ID Number 102637		2. Exact name of the Limited Liability Company Consolidated Holdings, LLC			
3. NAICS Code 53 - Real Estate and Rental ar		4. Brief description of the character of business conducted in Rhode Island Real Estate & Related Investments			
5. State of Formation Rhode Island					
6. Principal Office Address 450 Veterans Memorial Parkway, Suite 7A		City East Providence		State RI	Zip 02914
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Jeffrey A. St. Sauveur			Contact Title Member		
Street Address 450 Veterans Memorial Parkway, Suite 7A		City East Providence		State RI	Zip 02914
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - 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 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 Jeffrey A. St. Sauveur				Date 10/18/16	
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

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