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	To First name					
	I	2. Exact name of the Limited Liability Company				
1657799	100 JEFFERS	100 JEFFERSON LLC				
3. NAICS Code	4. Brief descrir	4. Brief description of the character of business conducted in Rhode Island				
53 - Real Estate and Rental and	ı	To buy, sell, hold and manage real estate				
5. State of Formation	1					
Rhode Island						
6. Principal Office Address	<u> </u>		City	State	Zip	
362 Broadway			Providence	RI	02909	
7. Mailing Address of Limited Lial	bility Company :	and Name or Title				
Contact Name Thomas S. Hemmendinger			Contact Title Attorney			
Street Address 362 Broadway			City Providence	State RI	^{Zip} 02909	
8. List ALL managers (names an	d addresses) of	the Limited Liabil	lity Company, IF APPLICAE	BLE - DO NOT LIST I	 Members	
Manager Name Robert P. Ferris			Manager Name			
Street Address PO Box 171605			Street Address			
City Boston	State MA	Zip 02117-344	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to ir	ndicate an attachment	
9. Resident Agent in Rhode Island	This information	is currently of reco	rd with the Department of Stat	e. 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				Date		
Robert P. Ferris, Manager						
Signature of Authorized Person						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

