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 **73528**	2. Exact name of the Limited Liability Company **Meeting Street Associates, LLC**
3. NAICS Code 53	4. Brief description of the character of business conducted in Rhode Island **Real Estate**
5. State of Formation **Rhode Island**	

6. Principal Office Address	City	State	Zip
101 Plain Street, 1st Floor, Suite 100	**Providence**	**RI**	**02903**

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name **Stefania M. Mardo**	Contact Title		
Street Address **101 Plain Street, 1st Floor, Suite 100**	City **Providence**	State **RI**	Zip **02903**

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name **Stefania M. Mardo**			Manager Name		
Street Address **101 Plain Street, 1st Floor, Suite 100**			Street Address		
City **Providence**	State **RI**	Zip **02903**	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 **Stefania M. Mardo**	Date 10·18·16
Signature of Authorized Person Stefania M Mardo	

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 21 2016
By 4028 AH

FORM 632 - Revised: 08/2016

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