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

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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1. Entity ID Number	2. Exact name of the Limited Liability Company					
1042059	Three Keyes Way, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental ar	Real Estate					
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
300 Centerville Road, Summit West, Suite 300		Warwick	RI	02886		
7. Mailing Address of Limited Lia	bility Company a	nd Name or Title		•	.	
Contact Name Wes Skorski		Contact Title Member				
Street Address 300 Centerville Road, Summit West, Suite 300		City Warwick	State RI	^{Zip} 02886		
8. List ALL managers (names ar	d addresses) of	the Limited Liabil	ity Company, IF APPLICABLE	- DO NOT LIST MI	MBERS	
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 inc	licate an attachment	
9. Resident Agent in Rhode Islan	d. This information	is currently of reco	ord with the Department of State.	Changes require filing	Form 642	
Under penalty of perjury, I decistatements, and that all statem				ny accompanying	schedules and	
Name of Authorized Person			Date	Date		
Wes Skorski				10/14/2016		
Signature of Authorized Person		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

OCT 2 4 2016

FORM 632 - Revised: 08/2016

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