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.	

	16 5		I I tabilità Campani			
1. Entity ID Number	2. Exact name of the Limited Liability Company					
299897	The D'Agostino Group, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
5 <i>5</i>	Purchasing, developing and sales, of all types of real estate.					
5. State of Formation	Fulcila	ang, developi	ing and sales, or an types	or rear cotate.		
Rhode Island	! ! !					
6. Principal Office Address			City	State	Zip	
37 Sanderson Road	Sanderson Road			RI	02917	
7. Mailing Address of Limited Lia	bility Compar	ny and Name or	Title of Contact Person			
Contact Name Peter D'Agostino		Contact Title Membe	Contact Title Member			
Street Address 37 Sanderson Road			City Smithfield	State RI	^{Zip} 02917	
8. List ALL managers (names ar	nd addresses) of the Limited L	iability Company, IF APPLICA	BLE - DO NOT LIST I	WEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	l			Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode Islar	nd. This inform	ation is currently o	f record with the Department of St	ate. Changes require filir	ng Form 642.	
Under penalty of perjury, I dec statements, and that all staten				ng any accompanyin	g schedules and	
Name of Authorized Person				Date		
Peter R. D'Agostino, Member				10/13	4/2016	
Signature of Authorized Person,	11	2 SIGN E	OCHMENT 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