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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

R.I. STATE

2018 OCT 31 Fit 4: 20

- → 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  | 2. Exact na                                  | 2. Exact name of the Limited Liability Company                              |                               |                    |                      |  |
|--|--|---|-------------------------------|--------------------|----------------------|--|
| 00090917 <b>6</b>  | Dul  | Dublin, LLC   |                               |                    |                      |  |
| 3. NAICS Code  |  | 4. Brief description of the character of business conducted in Rhode Island |                               |                    |                      |  |
| c 53 ⊡   | homesales                                    |   |                               |                    |                      |  |
| 5. State of Formation  | 1  |   |                               |                    |                      |  |
| Rhocle Island  |  |   |                               |                    |                      |  |
| 6. Principal Office Address 704  |  |   | City                          | State              | 02865                |  |
|  |  |   | ULLINGE TENTE                 | 1000               | 0000                 |  |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person  |  |   |                               |                    |                      |  |
| Contact Name Cerrete   |  |   | Contact Title President / CEO |                    |                      |  |
| Street Address<br>37 Ockham Luc  |  |   | Worth Providen                | State              | 02908                |  |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - 50 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                  |  |
|  | <u>.                                    </u> | <b>I</b>  | Che                           | eck the box to inc | dicate 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 C Date   |  |   |                               |                    |                      |  |
| Michale Cox  | rala   |   |                               | 10/311             | 2016                 |  |
| Signature of Authorized Person.  |  |   |                               |                    |                      |  |
| Welle ( especial 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 FILED

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