	State of Rhode Island and Providence Plantations  Department of State - Business Services Division
\ /	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	2. Exact nar	me of the Limited	Liability Company		
103116		y Company, LL0			
3. NAICS Code	4. Brief desc	cription of the cha	aracter of business conducte	ed in Rhode Island	
53 - Real Estate and Rental and	OWN, DEVI	ELOP, AND MAN	NAGE REAL ESTATE		
5. State of Formation					
RHODE ISLAND					
Principal Office Address			City	State	7:0
62 SHORE DRIVE			WARREN	RI	Zip <b>02885</b>
7. Mailing Address of Limited Lia	bility Compan	y and Name or T	itle of Contact Person		
Contact Name W. BARRETT HOL	BY		Contact Title MANAGER		
Street Address 62 SHORE DRIVE					
			City WARREN	State RI	<sup>Zip</sup> 02885
List ALL managers (names an Manager Name	d addresses)	of the Limited Lia	ibility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS
W. BARRETT HOL	_BY		Manager Name		
Street Address 62 SHORE DRIVE			Street Address		
City WARREN	State RI	Zip 02885	City	State	Zip
Manager Name	<del></del>		Manager Name		
Street Address			Street Address		
City					
, , , , , , , , , , , , , , , , , , ,	State ———	Zip	City	State	Zip
Resident Agent in Phodo John d	-			Check the box to in	dicate an attachment
Resident Agent in Rhode Island	. This information	on is currently of re	cord with the Department of Sta	t- Ob-	
Inder penalty of perjury, I decla tatements, and that all stateme	nts containe	ातवर । nave exai d herein are true	mined this report, includin and correct.	g any accompanying	schedules and
ame of Authorized Person				Date	
/. BARRETT HOLBY		7		9/26/	7016
ignature of Authorized Person					2.76
	<del>- × /</del>				FILED

MAIL TO:

**Division of Business Services** 

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

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

FORM 632 Rovised 843 1