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2016 MOV 30 PM 3: 49

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 name of the Limited Liability Company						
803256	1347 LLC						
3. NAICS Code 53 - Real Estate and Rental and	Brief description of the character of business conducted in Rhode Island Real Estate holding company						
5. State of Formation							
Rhode Island							
6. Principal Office Address	<u> </u>		City	State	Zip		
214 Main Street			East Greenwich	RI	02818		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Chad A. Verdi			Contact Title Member				
Street Address 100 Pheasant Drive			City East Greenwich	State RI	^{Zip} 02818		
8. List ALL managers (names ar	nd 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 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 Domon							
Chad A. Verdi, Member ///20/23/6					20/2016		
Signature of Authorized Person SIGN 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

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