| | Ctate of Dhada Jaland and Dravidance Diantetions | |
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| | State of Rhode Island and Providence Plantations Office of the Secretary of State | Fee: \$50. |
| | Division Of Business Services 148 W. River Street | |
| | Providence RI 02904-2615 | |
| HOPE | (401) 222-3040 | |
| imited Liability Co | ompany | |
| Annual Report | r 1 - November 1 | |
| o file its annual report w | G.L. 7-16-66(d), each limited liability company failing or refusing vithin thirty (30) days after the time prescribed by law (R.I.G.L. 7- a penalty fee of \$25.00. | |
| ANNUAL REPORT YEA | AR: <u>2017</u> | |
| 1. ID No. <u>001335</u> | 615 | |
| 2. Exact Name of the | Limited Liability Company MAVEN PROPERTIES, LLC | |
| 3. State of Formation | | |
| State: <u>RI</u> | | |
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| | ARTICLE III | |
| | ARTICLE III | |
| Using the following NAI | ARTICLE III CS codes, please select the code that best describes your busines | SS. |
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| NAICS Code 4. Brief Description of REAL ESTATE INVE 5. Principal Office Add No. and Street: 15 City or Town: 15 6. Mailing Address of Contact Name: PATR No. and Street: 15 City or Town: EA | CS codes, please select the code that best describes your business T the Character of the Business Which is Actually Conducted in ESTMENT dress 54 WARREN AVENUE AST PROVIDENCE State: RI Zip: 02914 C Limited Liability Company and Name or Title of Contact Person RICK J. MCKENNA JR. Contact Title: PRESIDENT 4 WARREN AVENUE AST PROVIDENCE State: RI Zip: 02914 C of Each Manager of the Limited Liability Company, if Applica | 81 n Rhode Island Country: <u>USA</u> con: Country: <u>USA</u> |
| NAICS Code 4. Brief Description of REAL ESTATE INVE 5. Principal Office Add No. and Street: 15 City or Town: E 6. Mailing Address of Contact Name: PATR No. and Street: 15 City or Town: E 7. Name and Address | CS codes, please select the code that best describes your business T the Character of the Business Which is Actually Conducted in ESTMENT dress 54 WARREN AVENUE AST PROVIDENCE State: RI Zip: 02914 C Limited Liability Company and Name or Title of Contact Person RICK J. MCKENNA JR. Contact Title: PRESIDENT 4 WARREN AVENUE AST PROVIDENCE State: RI Zip: 02914 C of Each Manager of the Limited Liability Company, if Applica | 81 n Rhode Island Country: <u>USA</u> con: Country: <u>USA</u> able. |

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

THOMAS H. DIPRETE, ESQ. 2 STAFFORD COURT CRANSTON, RI 02920

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 13 Day of February, 2017 at 11:49:17 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>PATRICK J. MCKENNA JR.</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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