s s	itate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615			
(401) 222-3040			
Limited Liability Company			
Annual Report			
Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing			
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>000129022</u>			
2. Exact Name of the Limited Liability Company Allen, Allen & Korson, LLC			
3. State of Formation			
State: <u>RI</u>			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code		6 53	
		<u> </u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
TO OWN, MANAGE, AND/OR SELL COMMERCIAL REAL ESTATE, AND TO ENGAGE IN			
ALL ACTIVITIES INCIDENTAL THERETO			
5. Principal Office Addre	SS		
No. and Street:130 BELLEVUE AVENUECity or Town:NEWPORTState: RIZip: 02840Country: USA			
City or Town: <u>NEWPORT</u> State: <u>RI</u> Zip: <u>02840</u> Country: <u>USA</u>			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: <u>221 THIRD STREET</u>			
City or Town: <u>NEV</u>	VPORT State: F	<u>RI</u> Zip: <u>02840</u> Country:	USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Nama	Address	
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code	, Country
MANAGER	JOHN ALLEN	1165 FIFTH AVE., #1513	
		NEW YORK, NY 10029 USA	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

WILLIAM R. PALOMBO 221 THIRD STREET NEWPORT, RI 02840

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

Signed this 17 Day of February, 2017 at 1:34:44 PM 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 WILLIAM PALOMBO

Signature of Authorized Person

Form No. 632 Revised 09/07

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