State of Rhode Isl	land and Providence i	Plantations			_		
	of State - Busin	ness Services	Division				
→ Filing period: Januar → Filing Fee: \$50.00 → Penalty: Additional \$2	•	not filed by April 1.	_				
1. Entity ID Number 5970	i i	Exact name of the Corporation Da Luz Realty, inc.					
Principal Office Address Pawtucket Avenue			City Pawtucket		State RI	Zip 02860	
4. NAICS Code 5. State of Incorporation Rhode Island		Brief description of the character of business conducted in Rhode Island Deal in and with real and personal property.					
7. List ALL officers (names a	and addresses)			Check	the box to in	ndicate an attachment 🔲	
President Name Daniel Daluz	Z	Vice-President	t Name Daniel Daluz				
Street Address 260 Pawtucket Avenue				Street Address 260 Pawtucket Avenue			
^{City} Pawtucket	State RI	^{Zip} 02860	City Pawtuck	ket	State RI	Zip 02860	
Secretary Name Daniel Daluz	Z		Treasurer Nam	^{ne} Daniel Daluz			
Street Address 260 Pawtucke				260 Pawtucket Ave	enue		
^{City} Pawtucket	State RI	^{Zip} 02860	City Pawtuck		State RI	^{Zip} 02860	
8. List ALL directors (names : Director Name	and addresses)		In Name		the box to in	dicate an attachment	
Daniel Daluz			Director Name				
Street Address 260 Pawtucke	t Avenue		Street Address				
City Pawtucket	State RI	^{Zip} 02860	City		State	Zip	
Director Name			Director Name	Director Name			
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized 10.		10. Shares Iss		Check 1	the box to inc	dicate an attachment	
This information is currently of record in the Department of State.		NUMBER OF	SHARES	CLASS/SERIES PAR VALUE			
		100		Common		No Par	
Changes require an additional	filing.			3		<u> </u>	

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee

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 Representative

Daniel Daluz

Signature of Authorized Representative

MAIL TO:

Division of Business Services

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

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



Date

FORM 630 - Revised: 02/2017

2-28-17