RI SOS Filing Number: 201749058220 Date: 9/1/2017 12:23:00 PM State of Rhode Island and Providence Plantations **Department of State - Business Services Division FILED** 201 U SEP 0 1 2017 Annual Report for the year: **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 3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island Real Estate Holding 5. State of Formation 6. Principal Office Address Zip 02865 leaudo d 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Street Address 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name Manager Name Street Address Street Address State Cita Zip. City State Zip Manager Name Manager Name Street Address Street Address State City Zip City State Zip Check the box to indicate 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 Person

Date

Signature of Authorized Herson

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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