

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2017 SEP -5 PM 3: 38

→ 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				
9926/9	SOARES REALTY LLC				
1/2011	JOARU	=3 PLEAN	9 460		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531110					
5. State of Formation	REALTY ESTATE				
6: Principal Office Address			City	State	Zip
37 MARK DR			LINCOLN	R-I	02865
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MARÍA SOARES			Contact Title OWNER		
Street Address 37 MARK DR				State 7-I.	Zip 02865
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		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	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					
// /		9-5-	17		
Signature of Authorized Person					

MAIL TO:

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

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

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BY on 311763