| s s | tate of Rhode Island and Pro Office of the Secreta | | ;0.00 |
|--|---|--|--------------|
| | Division Of Business | Services | |
| | 148 W. River S Providence RI 029 | | |
| HOPE | (401) 222-30 | | |
| Limited Liability Com | nany | | |
| Annual Report | ipaliy | | |
| Filing Period: September 1 | - November 1 | | |
| | 7-16-66(d), each limited liability com in thirty (30) days after the time preso penalty fee of \$25.00. | | |
| ANNUAL REPORT YEAR: | <u>2017</u> | | |
| 1. ID No. <u>00106151</u> | 3 | | |
| 2. Exact Name of the Limited Liability Company Shady Oaks Apartments LLC | | | |
| 3. State of Formation | | | |
| State: <u>DE</u> | | | |
| | ARTICLE III | | |
| Enter the six digit NAICS (| Code that best describes the primary | business conducted by the entity. Downloa | ad |
| | e information on <u>NAICS</u> can be found | | |
| <u>531190</u> | | | |
| 4. Brief Description of th | e Character of the Business Whicl | is Actually Conducted in Rhode Island | |
| | | | |
| REAL ESTATE | | | |
| 5. Principal Office Addre | SS | | |
| No. and Street: 75 LA | MBERT LIND HIGHWAY | | |
| | WICK | State: <u>RI</u> Zip: <u>02886</u> Country: <u>USA</u> | <u>L</u> |
| 6. Mailing Address of Li | mited Liability Company and Name | e or Title of Contact Person: | |
| Contact Name: Contact | Title: | | |
| No. and Street: <u>75 LAI</u> City or Town: WARV | MBERT LIND HIGHWAY | tate: RI Zip: 02886 Country: USA | 7 |
| | | | <u>\</u> |
| 7. Name and Address of DO NOT LIST MEMBE | Each Manager of the Limited Lial RS | ollity Company, if Applicable. | |
| Title | Individual Name | Address | |
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country | |
| MANAGER | KELLY & PICERNE VENTURE CORP. | 75 LAMBERT LIND HIGHWAY WARWICK, RI 02886 USA | |

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

HASLAW, INC. HINCKLEY, ALLEN & SNYDER LLP 50 KENNEDY PLAZA, SUITE 1500 PROVIDENCE , RI 02903

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

Signed this 8 Day of September, 2017 at 4:16:48 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 <u>ROBERT M PICERNE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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