RI SOS Filing Number: 201749464940 Date: 9/8/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

S 6 8 3

Annual Report for the year: 2017

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					
795949	Gu	ardvain	Real Est	late 11c		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531390	Real Estate Rental - Commercial Real Estate					
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
391 Warren Avenue			E. Providence	RI	02914	
7. Mailing Address of Limited Lia		ind Name or Title		•		
Contact Name Joseph P. Martin			Contact Title Manager			
Street Address PO Box 4854			City Rumford	State RI	^{Zip} 02916	
8. List ALL managers (names an		the Limited Liabil	, 	BLE - DO NOT LIST N	1EMBERS	
Manager Name Joseph P. Martin			Manager Name			
Street Address 358 Juniper Street			Street Address			
City E. Providence	State RI	^{Zip} 02914	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to in	ndicate an attachment	
9. Resident Agent in Rhode Islan	nd. This information	n is currently of reco	ord with the Department of Sta	ite. Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all statem				g any accompanyini	g schedules and	
Name of Authorized Person				Date	Date	
Joseph P. Martin				9/5/17		
Signature of Authorizes Rerson	₹! <u>~</u>	GWE'IGN DO	CUMENT HERE			
1 / 1						

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 OV

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