



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

SECRETARY OF STATE

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 1661960		2. Exact name of the Limited Liability Company 300 SUMMIT AVENUE, LLC			
3. NAICS Code S31110		4. Brief description of the character of business conducted in Rhode Island To acquire, construct, own and manage real property.			
5. State of Formation Rhode Island					
6. Principal Office Address 32 Midnight Court		City Saunderstown	State RI	Zip 02874	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Thomas R. Factor		Contact Title Member			
Street Address 32 Midnight Court		City Saunderstown	State RI	Zip 02874	
8. List ALL managers (names and addresses) of the Limited Liability Company IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Thomas R Factor		Manager Name			
Street Address 32 Midnight Court		Street Address			
Saunderstown RI 02874		City	State	Zip	
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 Thomas R. Factor				Date 9-11-2017	
Signature of Authorized Person <i>Thomas R Factor</i>		SIGN DOCUMENT HERE			

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

SEP 15 2017

BY

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