2	State of Rhode Island and Pro		Fee: \$50.00
	Office of the Secreta		
	Division Of Business 148 W. River St		
	Providence RI 0290		
HOPE	(401) 222-304	0	
Limited Liability Company Annual Report			
Filing Period: September 1	- November 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>000143286</u>			
2. Exact Name of the Limited Liability Company <u>119 MAIN STREET, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>531311</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
ACQUIRING, LEASING, DEVELOPING, SELLING AND OTHERWISE DEALING IN REAL			
ESTATE			
5. Principal Office Address			
No. and Street: <u>11</u>	7 MAIN STREET		
	AKEFIELD State: <u>R</u>	<u>I</u> Zip: <u>02879</u> Country:	<u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: <u>931 JEFFERSON BOULEVARD, SUITE 2004</u>			
City or Town: WARWICK State: RI Zip: 02886 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Cod	e, Country
MANAGER	KENNETH L MUNROE	117 MAIN STREET WAKEFIELD, RI 02879 USA	

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

JONATHAN V. KALANDER, ESQ. 931 JEFFERSON BOULEVARD, SUITE 2004 WARWICK, RI 02886

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

**Signed this 20 Day of September, 2017 at 10:33:01 AM 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 KENNETH MUNROE

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$  2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved