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FOR M. Ches.Crup Jan Up O'44

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				
1659827	30 Route 6, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531110	Own the real estate located at 30 Highland Avenue, East Providence, RI.				
5. State of Formation					
Rhode Island					
6. Principal Office Address			City	State	Zip
16 Highland Avenue			Seekonk	MA	02771
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Richard A. van Tienhoven			Contact Tille Resident Agent		
Street Address 100 Jefferson Blvd - Suite 315			City Warwick	State RI	^{Zip} 02888
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	Stale	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
· <u> </u>				Check the box to inc	dicate 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 dec statements, and that all statem				ng any accompanying	schedules and
Name of Authorized Person Date					
Brian Sadler 9-12-/7					
Signature of Authorized Person SIGN ROCUMENT HERE					
		SIGNRO	CUMENT HERE		
				FILED	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

FORM 632 - Revised: 02/2017