State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

Annual Report for the year: Limited Liability Company

2017

→ 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				
790042	ARK Properties, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531110	To hold and manage Real Estate				
5. State of Formation	1				
Rhode Island					
6. Principal Office Address			City	State	Zıp
1988 Louisquisset Pike			Manager	RI	02865
7. Mailing Address of Limited Lia		and Name or Titl		<u>-</u>	_
Contact Name Michael F. Elliott			Contact Title Manager		
Street Address 1988 Louisquisset Pike			City Lincoln	State RI	^{Zip} 02865
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Michael F. Elliott			Manager Name John Trojan, Jr.		
Street Address 1988 Louisquisset Pike			Street Address 1988 Louisquisset Pike		
City Lincoln	State RI	^{Zip} 02865	City Lincoln	State RI	^{Zip} 02865
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
9. Resident Agent in Rhode Islan					
Under penalty of perjury, I dec statements, and that all staten	clare and affirm nents contained	that I have exar herein are true	nined this report, includi and correct.	ng any accompanying	schedules and
Name of Authorized Person	, ,			Date Or 7	1 17
Michael F. Elliott	<u> </u>			1 71.2	0.17
Signature of Authorized Person 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

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