RI SOS Filing Number: 201750484890 Date: 9/26/2017 4:00:00 PM

	State of Rhode Island and Providence Plantations  Department of State - Business Services	Division
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## 2017 Annual Report for the year: **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.

					9,770			
1. Entity ID Number 2. Exact name of the Cathedral Ventures			iability Company	TE TE				
3. NAICS Code	4. Brief desc	ription of the chara	cter of business conducted in Rhode Island					
55 - Management of Compani	Acquire entity and/or various other interests, conduct all activates related, necessary or							
5. State of Formation Rhode Island	incidental thereto.							
6. Principal Office Address			City	State	Zıp			
5 Cathedral Square			Providence	RI	02903			
7. Mailing Address of Limited Lia	bility Compan	and Name or Titl	e of Contact Person		1			
Contact Name Robert R. Gaudre	au, Jr.		Contact Title					
Street Address 5 Cathedral Square			City Providence	State RI	<sup>Zıp</sup> 02903			
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS								
Manager Name Cathedral Develo	pment Group	, Inc.	Manager Name					
Street Address 5 Cathedral Squa	re _		Street Address					
City Providence	State RI	Z <sub>IP</sub> 02903	City	State	Zip			
Manager Name		<del></del>	Manager Name					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
Check the box to indicate 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 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								
Robert R. Gaudreau, Jr., President of Cothodocu Development Group, Inc. 9/26/17								
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

SEP 26 2017

FORM 632 - Revised: 02/2017