Ŭ	tate of Rhode Island and Pro Office of the Secreta		NS Fee: \$50.00
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-30	treet)4-2615	
Limited Liability Com Annual Report	pany		
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		-
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>000132110</u>	5		
2. Exact Name of the Li	mited Liability Company <u>PINEAP</u>	PLE HOSPITALITY	, <u>LLC</u>
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
0	Code that best describes the primary e information on <u>NAICS</u> can be found	•	the entity. Download
the list of codes <u>here.</u> Mor	Code that best describes the primary	online.	-
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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JAMES DECOTA 372 CODDINGTON HIGHWAY NEWPORT, RI 02840

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

Signed this 27 Day of September, 2017 at 11:28:31 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 SANJAY PATEL

Signature of Authorized Person

Form No. 632 Revised 09/07

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