S S	tate of Rhode Island and Pro Office of the Secreta		ons Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	reet	
HOPE	(401) 222-304	10	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
<b>1. ID No.</b> <u>00064292</u>	<u>L</u>		
2. Exact Name of the Li	mited Liability Company <u>THE SH</u>	ACK LLC	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
-	Code that best describes the primary e information on <u>NAICS</u> can be found	-	/ the entity. Download
4. Brief Description of th	e Character of the Business Which	is Actually Conduct	ed in Rhode Island
<u>ACQUIRE, OWN, OPE</u> <u>PROPERTY.</u>	<u>RATE, MAINTAIN, MANAGE, I</u>	EASE, DEVELOP A	AND SELL
5. Principal Office Addre	SS		
No. and Street: <u>101</u>	DYER STREET COND FLOOR		
	OVIDENCE State: <u>R</u>	Zip: <u>02903</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact F	Person:
Contact Name: Contact			
	<u>DYER STREET</u> COND FLOOR		
	DVIDENCE State: R	<u>I</u> Zip: <u>02903</u>	Country: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab RS	ility Company, if Ap	blicable.
Title	Individual Name	Ado	Iress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country

MANAGER	ANDREW W. DAVIS	6 SPINDRIFT WAY BARRINGTON, RI 02806 USA		
MANAGER	JOSHUA P. DAVIS	4 RIDGELAND ROAD BARRINGTON, RI 02806 USA		
MANAGER	KATHERINE B. LENTZ	72 RUMSTICK ROAD BARRINGTON, RI 02806 USA		
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11 ANDREW W. DAVIS, ESQ. 101 DYER STREET PROVIDENCE, RI 02903				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				
Signed this 28 Day of September, 2017 at 11:16:52 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 <u>ANDREW W. DAVIS</u> Signature of Authorized Person				
Form No. 632 Revised 09/07				
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