Ĭ	State of Rhode Island and P Office of the Secre			Fee: \$50.00
	Division Of Busin 148 W. River	Street		
HOPE	Providence RI 02 (401) 222-3			
Limited Liability Com Annual Report Filing Period: September 1				
	7-16-66(d), each limited liability co in thirty (30) days after the time pre penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	<u>2017</u>			
1. ID No. <u>00016401</u>	8			
2. Exact Name of the Li	mited Liability Company \underline{CMF}	ASSOCIATE	5 <u>, LLC</u>	
3. State of Formation				
State: <u>RI</u>				
-	Code that best describes the prima e information on <u>NAICS</u> can be fou	•	nducted by the	entity. Download
<u>531110</u>				
4. Brief Description of th	e Character of the Business Wh	ich is Actually	Conducted in	n Rhode Island
4. Brief Description of th		ich is Actually	Conducted in	n Rhode Island
	ING COMPANY	ich is Actually	Conducted in	n Rhode Island
REAL ESTATE HOLD 5. Principal Office Addre No. and Street: 600 P	ING COMPANY		Conducted in	n Rhode Island Country: <u>USA</u>
REAL ESTATE HOLD 5. Principal Office Addre No. and Street: 600 P City or Town: GREE	ING COMPANY ess PUTNAM PIKE, SUITE 4	State: <u>RI</u> Z	'ip: <u>02828</u>	Country: <u>USA</u>
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REAL ESTATE HOLD 5. Principal Office Addres No. and Street: 600 P City or Town: GREH 6. Mailing Address of Lite Contact Name: Contact No. and Street: 600 P GREH Contact Street: GREH Contact Name: Contact No. and Street: 600 P City or Town: GREH	ING COMPANY ess PUTNAM PIKE, SUITE 4 ENVILLE mited Liability Company and Na Title: UTNAM PIKE, SUITE 4 ENVILLE	State: <u>RI</u> z me or Title of State: <u>RI</u> z	^z ip: <u>02828</u> Contact Pers p: <u>02828</u>	Country: <u>USA</u> on: Country: <u>USA</u>
REAL ESTATE HOLD 5. Principal Office Addres No. and Street: 600 P City or Town: GREE 6. Mailing Address of Lite Contact Name: Contact No. and Street: 600 P City or Town: GREE 6. Mailing Address of Lite Contact Name: Contact No. and Street: 600 P City or Town: GREE 7. Name and Address of	ING COMPANY ess PUTNAM PIKE, SUITE 4 ENVILLE mited Liability Company and Na Title: UTNAM PIKE, SUITE 4 ENVILLE	State: <u>RI</u> Z me or Title of State: <u>RI</u> Z fability Compa	Cip: <u>02828</u> Contact Pers p: <u>02828</u> ny, if Applica Address	Country: <u>USA</u> on: Country: <u>USA</u> able.

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

RICHARD J. LAND, ESQ. ONE PARK ROW, SUITE 300 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 2 Day of October, 2017 at 3:19:22 PM 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>COLLEEN M FARLEY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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