St.	ate of Rhode Island and Office of the Se			Fee: \$50.00
HOPE	Division Of Bu 148 W. Ri Providence RI (401) 22	ver Street 02904-2615		
Limited Liability Comp Annual Report Filing Period: September 1 -				
	7-16-66(d), each limited liability thirty (30) days after the time enalty fee of \$25.00.			
ANNUAL REPORT YEAR:	<u>2017</u>			
1. ID No. <u>000164018</u>				
2. Exact Name of the Limited Liability Company <u>CMF ASSOCIATES, LLC</u>				
3. State of Formation				
State: <u>RI</u>				
	ARTICLE	E III		
0	ode that best describes the pri information on <u>NAICS</u> can be	•	conducted by the	entity. Download
	Character of the Business	Nhich is Actus	ally Conducted in	Phode Island
4. Bhei Description of the		WIICH IS Actua		
REAL ESTATE HOLDIN	IG COMPANY			
5. Principal Office Addres	S			
	<u>TNAM PIKE, SUITE 4</u> <u>IVILLE</u>	State: <u>RI</u>	Zip: <u>02828</u> (Country: <u>USA</u>
6. Mailing Address of Lim	ited Liability Company and	Name or Title	of Contact Perso	n:
Contact Name: Contact T No. and Street: <u>600 PU</u> City or Town: <u>GREEN</u>	<u>TNAM PIKE, SUITE 4</u>	State: <u>RI</u>	Zip: <u>02828</u> (Country: <u>USA</u>
7. Name and Address of E DO NOT LIST MEMBER	Each Manager of the Limited S	I Liability Con	npany, if Applical	ole.
Title	Individual Name First, Middle, Last, Suffix	Addres	Address s, City or Town, State,	Zip Code, Country
8. RESIDENT AGENT IN RI	HODE ISLAND - DO NOT ALT	ER		

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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