RI SOS Filing Number: 201751245030 Date: 10/6/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017 **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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
81873	AAD, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531390	Real estate holding company.				
5. State of Formation	1				
RI					
6. Principal Office Address			City	State	Zip
1056 Hope Street			Providence	R1	02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Dr. John Zwetchkenbaum			Contact Title Member		
Street Address 1056 Hope Street			City Providence	State RI	^{Zip} 02906
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Dr. John Zwetchkenbaum			Manager Name		
Street Address 1056 Hope Street			Street Address		
City Providence	State RI	^{Zip} 02906	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
			<u></u>	Check the box to i	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 Ton Tuethkinham, MD Date 9/28/17					
Signature of Authorized Person SIGN DOCUMENT HERE					
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov