

STALIP

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.

1. Entity ID Number 842518		2. Exact name of the Limited Liability Company DV VIII, LLC				
3. NAICS Code 531120		Brief description of the character of business conducted in Rhode Island commercial property				
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
33 College Hill Road, Building 15			Warwick	RI	02889	
7. Mailing Address of Limite	•	any and Name o	r Title of Contact Person			
Contact Name Brian Bucci			Contact Title Managing Member			
Street Address PO Box 6187			City Warwick	State RI	^{Zip} 02887	
8. List ALL managers (nam	nes and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u> </u>	L		Check the box to i	indicate an attachment	
9. Resident Agent in Rhode	e Island. This inform	mation is currently	of record with the Department of St	tate. Changes require filir	ng Form 642.	
Under penalty of perjury, statements, and that all s			examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Persor	n			Date	. 1	
Brian A. Bucci		Λ	ΛΛ	10/	2/17	
Signature of Authorized Pe	rson	Sign	DOCUMENT HERE			

MAIL TO:

Division of Business Services

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

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

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