RI SOS Filing Number: 201751491860 Date: 10/12/2017 3:23:00 PM

State of Rhode Island and Providence Plantations					
Department of State - Business Services Division					
Annual Report for the year: 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.					R.I. DEPT. OF STA
1. Entity ID Number	2. Exact name	e of the Limited Lia	ability Company		N m
000484902	Chi	Dster	LLC		22
3. NAICS Code	Brief description of the character of business conducted in Rhode (sland				
53/190	Commercial Property Leasing				
5. State of Formation					
LRL					
6. Principal Office Address			City	State	Zıp
17 Gosnold Road			n. Kingstow	n RI	02852
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Contact Title Marsocci Member					
Street Address Bosnold	· —	ad	Member City Kingston	State R	[Zip 02852
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
	•	_ _	·	Check the box to	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 Date					
Carol E. Marsocci Signature of Authorized Person Massascci					112/17
Signature of Authorized Person					
L'art CU fassacci					

MAIL TO:

Division of Business Services

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

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

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BY, 57.314777