	tate of Rhode Island and Pr	avidance Plantations	F \$50.00			
	Office of the Secret		Fee: \$50.00			
Division Of Business Services						
148 W. River Street						
Providence RI 02904-2615						
HOPE	(401) 222-30	040				
Limited Liability Com Annual Report Filing Period: September 1						
	7-16-66(d), each limited liability con in thirty (30) days after the time pres penalty fee of \$25.00.					
ANNUAL REPORT YEAR:	<u>2017</u>					
1. ID No. <u>001657561</u>						
2. Exact Name of the Limited Liability Company <u>APPRAISAL NATION, LLC</u>						
3. State of Formation						
State: <u>NC</u>						
ARTICLE III						
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.						
<u>531320</u>						
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in Rho	de Island			
APPRAISAL SERVICE	<u>S</u>					
5. Principal Office Addre	SS					
No. and Street: 500 GR	REGSON DRIVE SUITE 120					
City or Town: <u>CARY</u>		State: <u>NC</u> Zip: <u>27511</u> Cou	intry: <u>USA</u>			
6. Mailing Address of Li	nited Liability Company and Nam	e or Title of Contact Person:				
Contact Name: Contact						
	EGSON DRIVE SUITE 120					
City or Town: <u>CARY</u>		State: <u>NC</u> Zip: <u>27511</u> Cou	untry: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS						
Title	Individual Name	Address				
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country			
MANAGER	ANTHONY MATTIA	500 GREGSON DRIVE SU CARY, NC 27511 USA	JITE 120			
MANAGER	BRIAN MCSHEEHY	500 GREGSON DRIVE SI	JITE 120			

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MIKE TEDESCO

CARY, NC 27511 USA

500 GREGSON DRIVE SUITE 120 CARY, NC 27511 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 16 Day of October, 2017 at 12:09:19 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>ANTHONY MATTIA</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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