(3)	State of Rhode Island and Providence Plantations
	State of Rhode Island and Providence Plantations Department of State - Business Services Division

5731 P

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 565926	2. Exact name of the Limited Liability Company TPG Hospitality Management Services, LLC					
3. NAICS Code 721110		Brief description of the character of business conducted in Rhode Island Management				
5. State of Formation Rhode Island						
6. Principal Office Address 1140 Reservoir Avenue	· ·		City Cranston	State RI	Zip 02920	
7. Mailing Address of Limited	Liability Compa	ny and Name o	r Title of Contact Person			
Contact Name Elizabeth A.	Procaccianti		Contact Title	Contact Title		
Street Address 1140 Reserv	oir Avenue		City Cranston	State RI	^{Zıp} 02920	
8. List ALL managers (name	s and addresses	s) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS	
Manager Name	•		Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
Manager Name		_	Manager Name			
Street Address	<u> </u>		Street Address			
City	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
9. Resident Agent in Rhode I	Island. This inform	nation is currently	of record with the Department of Sta	ate. Changes require filir	ng Form 642.	
	declare and aff	irm that I have	examined this report, including			
Name of Authorized Person		Date				
Elizabeth Figcackianti				10-13-17		
Signature of Artiforized Pers	son	SIGI	N DUCUMENT 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

