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## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2017

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1 Entity ID No.	2. Exact name of the limited fiability company					
236887	Massachusetts Avenue LLC					
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island					
Rhode Island	Renta	el Real	Estate	531116	)	_
5. Principal office address	21. 1		City		State R.I.	Zip
64 Othmar	street		Narra	gansett	$\perp \mathcal{K} \cdot \mathcal{I}$ ,	02882
	{					
Delia G. Da	pnaldso	on	Contact Title	rer		
Street Address 64 Othman			Mana	janse#	State R.Z.	02882
Manager Name Delia G. Dai	naldson		Manager Name			
Street Address 64 OHMAR Street  City avragansett R.I. 02882			Street Address			
NavraganseH	State	D 2882	City		State	Zip
Manager Name/			Manager Name			
Street Address			Street Address			
City	State	Zip	City	<del> </del>	State	Zip
		<u></u>		<u> </u>		
This information is currently of	record in the Offi	ce of the Secretary	of State, Changes re	aula filina Ec	C42	

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OCT 18 2017

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.

Signature of Authorized Person

Date

Print or Type Name of Authorized Person



Form No. 632 Revised: 01/2012