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Annual Report for the year: 2017 **Limited Liability Company**

FOR SECRETARY OF STATE USE ONLY

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

Entity ID Number 2. Exact name of the Limited Liability Company					
160867	MAF REALTY, LLC				
	· <u>-</u>				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
53110	REAL ESTATE.				
5. State of Formation					
RHODE ISLAND					
6. Principal Office Address			City	State	Zip
203 KILLINGLY STREET			PROVIDENCE	RI	02909
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name FRANCESCO CASSISI			Contact Title MEMBER		
Street Address 203 KILLINGLY STREET			City PROVIDENCE	State RI	^{Zip} 02909
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name FRANCESCO CASSISI			Manager Name		
Street Address 203 KILLINGLY STREET			Street Address		
City PROVIDENCE	State RI	^{Zip} 02909	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
		<u> </u>		Check the box to i	ndicate 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					
Francesco Cassisi 10-19-17					
Signature of Authorized Person					
Frances 20 Cassisi 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 FORM 632 - Revised: 08/2017