S S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00	
Division Of Business Services				
	148 W. River Street			
	Providence RI 02904-2615 (401) 222, 2040			
HOPE	(401) 222-30	40		
Limited Liability Company				
Annual Report				
Filing Period: September 1 - November 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing				
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2017				
1. ID No. <u>000128133</u>				
2. Exact Name of the Limited Liability Company <u>MILHAUS, LLC</u>				
3. State of Formation				
State: <u>RI</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.				
the list of codes <u>more</u> . More information on <u>writeo</u> can be found online.				
<u>531120</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
4. Bhe beschption of the onaracter of the business which is Actually conducted in Knode Island				
<u>REAL ESTATE</u>				
5. Principal Office Address				
No. and Street: 1 SIMS AVENUE				
	DX 4			
	OVIDENCE State: <u>RI</u>	Zip: <u>02909</u> Country:	<u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: MICHAEL CAREY RUO Contact Title: REGISTERED AGENT				
No. and Street: <u>1 SIMS AVENUE BOX 4</u>				
		e: <u>RI</u> Zip: <u>02909</u> Count	ry: <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	

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

MICHAEL C RUO 27 SIMS AVENUE, BOX 4 PROVIDENCE, RI 02909

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

Signed this 24 Day of October, 2017 at 7:33:19 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>MICHAEL CAREY RUO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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