RI SOS Filing Number: 201752164970 Date: 10/23/2017 4:00:00 PM

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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 2. Exact name of the Limited Liability Company Best Location Block Island, LLC							
3. NAICS Code					·		
Fall Real Estate			nadici of basiliess collection				
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
10 Old Forge Lane			Hampton	NJ	08827		
7. Mailing Address of Limited Lia	bility Compan	y and Name or T	itle of Contact Person		l		
Contact Name Michael Barile			Contact Title Member				
Street Address 10 Old Forge Lane			City Hampton	State NJ	^{Zıp} 08827		
8. List ALL managers (names ar	nd addresses)	of the Limited Li	ability Company, IF APPLICA	BLE - DO NOT LIST N	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name	4	<u>.</u>	Manager Name				
Street Address			Street Address				
Crty	State	Zip	City	State	Zip		
Check the box to indicate an attachme							
9. Resident Agent in Rhode Islan	nd. This informa	ation is currently of	record with the Department of Sta	ate. Changes require filin	g 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				Dale	1 1		
Michael Barile		///		16	116/17		
Signature of Authorized Person 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

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