s	tate of Rhode Island and P Office of the Secre		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
	Providence RI 02		
HOPE	(401) 222-3	040	
Limited Liability Company			
Annual Report Filing Period: September 1 - November 1			
rilling Feriod. September T			
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>000142536</u>			
2. Exact Name of the Limited Liability Company JONES LANG LASALLE NEW ENGLAND,			
L.L.C.			
3. State of Formation			
State: <u>DE</u>			
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.			
<u>531390</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
DEAL ESTATE SEDVICES			
REAL ESTATE SERVICES			
5. Principal Office Addre	SS		
No. and Street: ONE]	POST OFFICE SQUARE		
City or Town: BOST		State: <u>MA</u> Zip: <u>02108</u> Cour	ntry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: ONE POST OFFICE SQUARE			
City or Town: BOST		State: MA Zip: 02108 Cour	ntry: <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	de, Country
MANAGER	WILLIAM BARRACK	ONE POST OFFICE SQ BOSTON, MA 02108 US/	UARE

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 25 Day of October, 2017 at 10:51:32 AM 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 MARK J. OHRINGER

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved