State of Rhode Island and Providence Plantations		
Department of State - Business Services Division	R.1 2017	
Annual Report for the year: 2017	NOV - VON	7.) }
Limited Liability Company	7 80	<u></u>
→ Filing period: September 1 - November 1 → Filing Fee: \$50.00	AHIC	<u></u>
-> Penalty: Additional \$25.00 fee if form is not filed by December 1.	S M	

					<u></u>			
1. Entity ID Number 907702		2. Exact name of the Limited Liability Company RWB Associates LLC						
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island						
53	To own,	To own, operate, and lease real estate.						
5. State of Formation RI			# 53111	70				
6. Principal Office Address			City	State	Zip			
46 Aborn Street, 4th Floor			Providence	RI	02903			
7. Mailing Address of Limited	Liability Compa	ony and Name o						
Contact Name Kimberly Haskins			Contact Title Controller	Contact Title Controller				
Street Address 46 Aborn Street, 4th Floor			City Providence	State RI	Zip 02903			
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS			
Manager Name			Manager Name	Manager Name				
Street Address			Street Address	Street Address				
City	State	Zip	City	State	Zip			
Manager Name			Manager Name	Manager Name				
Street Address			Street Address	Street Address				
City	State	Zip	City	State	Z:p			
	I			Check the box to	indicate an attachment			
9. Resident Agent in Rhode I	sland. This inforr	nation is currently	of record with the Department of Sta	ate. Changes require fili	ng Form 642.			
Under penalty of perjury, I statements, and that all sta			examined this report, including true and correct.	ig any accompanyin	g schedules and			
Name of Authorized Person			Date	Date				
Kimberly Haskins			10/30/2017					
Signature of Authorized Pers	on Kum	berlye	g plankwiss					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

NOV 0 1 2017

BY 1481