RI SOS Filing Number: 201752697900 Date: 11/1/2017 4:00:00 PM

annual Report for i	the year: 20 ompany)17			R.I. DE BUS 2017 NOV	
→ Filing period: Septe	ember 1 - Novem	ber 1			N SEE	
→ Fiting Fee: \$50.00 → Penalty: Additional \$	\$25.00 fee if form	is not filed by E	ecember 1.			
7 Chang. Madilional	\$25.55 155 H 15.111	is not mod by b			→ 35 m	
I. Entity ID Number 1335279		2. Exact name of the Limited Liability Company One Eddy CA Investor, LLC				
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island				
23 // D	To own,	To own, operate, and lease real estate.				
5. State of Formation						
र।						
6. Principal Office Address			City	State	Zîp	
46 Aborn Street, 4th Floor			Providence	RI	02903	
'. Mailing Address of Limi	ited Liability Compa	any and Name o	r Title of Contact Person	<u> </u>		
Contact Name Kimberly Haskins			Contact Title Controller			
Street Address 46 Aborn Street, 4th Floor			City Providence	State RI	^{Zip} 02903	
3. List ALL managers (na	mes and addresse	s) of the Limited	Liability Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS	
Manager Nam			Manager Name			
Street Address			Street Address			
Citr	Sla [†]	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Stree: Address			
Dity	State	Zip	City	State	Zip	
	I			Check the box to	indicate an attachment	
. Resident Agent in Rhoo	de Island. This infor	nation is currently	of record with the Department of Stat	e. Changes require fili	ng Form 642.	
Under penalty of perjury statements, and that all			examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person				Date		
Name of Authorized Person				10/30/2017		

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 01 201

FORM 632 - Revised: 08/2017

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