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 870 Oaklawn Avenue, LLC					
3. NAICS Code 53 - Real Estate and Rental and 5. State of Formation RI	4. Brief description of the character of business conducted in Rhode Island  Real estate  531 300					
6. Principal Office Address			City	State	Zip	
870 Oaklawn Avenue			Cranston	RI	02920	
7. Mailing Address of Limited Lie	bility Company	and Name or Ti	tle of Contact Person			
Contact Name Bruce D. Lane			Contact Title			
Street Address 870 Oaklawn Avenue			City Cranston	Stale RI	<sup>Zip</sup> 02920	
8. List ALL managers (names ar	nd addresses) o	f the Limited Lia	bility Company, IF APPLICA	ABLE - DO NOT LIST N	AEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Ziρ	City	State	Zip	
		.1		Check the box to in	dicate an attachment	
9. Resident Agent in Rhode Islan						
Under penalty of perjury, I dec statements, and that all staten	lare and affirm ents contained	that i have exa d herein are tru	mined this report, including and correct.	ng any accompanying	schedules and	
Name of Authorized Person				Date		
Bruce D. Lane				10/2	6/17	
Signature of Authorized Person	2/ 1	S/GN DC	OCUMENT HERE			
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MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.n.gov

FORM 632 - Revised: 08/2016