RI SOS Filing Number: 201752978540 Date: 11/3/2017 4:00:00 PM

ce Plantations siness Services Division

Annual Report for the year:	201
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.

	,,00 100 // 101// 10						
1. Entity ID Number	2. Exact nar	ne of the Limite	ed Liability Company	1.6			
161394	1/9	Algonquin Properties. L					
3. NAICS Code		// //					
53,390	Jor	4. Brief description of the character of business conducted in the character of business conduct					
5. State of Formation		/ /	J				
RI							
6. Principal Office Address	. 2 . 1		City Rumfold	State	Zip 029/6		
6. Principal Office Address 1/0 Algungu.	n Koaa			714111/01-			
7. Mailing Address of Limited	l Liability Compar	ny and Name o	r Title of Contact Person				
Corpact Name CDAA			Contact Title	Contact Title			
Street Address gonguin Rodd		City Rum toxel	State	Zip 29/6			
8 List ALL managers (name	es and addresses) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS		
Manager Name		Manager Name	Manager Name				
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				Check the box to	indicate an attachment		
O. Resident Agent in Phode	Island This inform	nation is currently	y of record with the Pepartment of Sta	ate. Changes require fili	ng Form 642.		
Li-der nonethy of portury	i declare and affi	irm that i have	examined this report, includin	g any accompanyin	g schedules and		
statements, and that all st	tatements conta	ined herein an	e true and correct.	T Data			
Name of Authorized Person ONNU 5 - Sous A			Date 10 -21-17				
Signature of Authorized Per		7					
	> \	Ms	1				
C m	1/						
	0						

Division of Business Services

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

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