S	tate of Rhode Island and Pro Office of the Secreta		5 Fee: \$50.00
	Division Of Business 148 W. River S		
Providence RI 02904-2615			
HOPE	(401) 222-304	40	
Limited Liability Company			
Annual Report Filing Period: September 1 - November 1			
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>001663313</u>			
2. Exact Name of the Limited Liability Company Pathways Property Solutions, LLC			
3. State of Formation			
State: <u>NV</u>			
ARTICLE III			
Enter the six digit NAICS Code that heat describes the primary business conducted by the entity. Develoed			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
236118			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
RESIDENTIAL REHAB / REMODELING			
5. Principal Office Address			
No. and Street: 102	OSCEOLA AVENUE		
		e: <u>RI</u> Zip: <u>02888</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: KAROLEE J. WYNNE Contact Title: MANAGER			
No. and Street: 102 C	DSCEOLA AVENUE		
City or Town: <u>WAR</u>	<u>WICK</u> Stat	e: <u>RI</u> Zip: <u>02888</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addres	ss
		Address, City or Town, Stat	e, Zip Code, Country
MANAGER	KAROLEE J. WTNNE	102 OSCEO WARWICK, RI 02	LA AVENUE 2888 USA

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

KAROLEE J. WYNNE 102 OSCEOLA AVENUE 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 7 Day of November, 2017 at 12:22:46 PM 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 KAROLEE J WYNNE

Signature of Authorized Person

Form No. 632 Revised 09/07

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