RI SOS Filing Number: 201753378790 Date: 11/15/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division					R.I. DEPT. OF STATE BUS SVCS DIVE	
Annual Report for th		7		70	SERVICE SERVICE	
_imited Liability Co	•	_			の場合	
→ Filing period: Septen	nber 1 - Novemb	per 1			7 000	
→ Filing Fee: \$50.00 → Penalty: Additional \$2	25 00 fee if form i	s not filed by De	cember 1.	_	- 22	
-> Penalty. Additional \$2	25.00 fee ii foliii f	S not med by be			· · · · · · · · · · · · · · · · · · ·	
1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
1665979	Bernon Investments, LLC					
<u> </u>		Brief description of the character of business conducted in Rhode Island				
3. NAICS Code	l l					
531312	REAL EST	REAL ESTATE MANAGEMENT				
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
728 VALLEY STREET			PROVIDENCE	RI	02908	
7. Mailing Address of Limit	ed Liability Compa	ny and Name or	Title of Contact Person			
Contact Name D. JOSEPH D'AMICO			Contact Title ATTORNEY			
Street Address 728 VALLEY STREET			City PROVIDENCE	State RI	^{Zip} 02908	
8. List ALL managers (nar	nes and addresse	s) of the Limited I	Liability Company, IF APPLICABI	LE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		1		Check the box to	indicate an attachment	
9 Resident Agent in Rhod	e Island. This infor	mation is currently o	of record with the Department of State			
Under penalty of periury	, I declare and af	firm that I have	examined this report, including			
statements, and that all statements contained herein are true and correct. Name of Authorized Person				Date	<u></u>	
D. JOSEPH D'AMICO				10.1	9-17	
D. JUGLETT D'ANITON	\ / \ \ .			1 /0 /	1~1 /	

SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

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

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

Signature of Authorized

FILED

BY 31 134

FORM 632 - Revised: 08/2016