| | State of Rhode Island and Pro Office of the Secret | | Fee: \$50.00 |
|---|---|--|-----------------|
| | Division Of Busines | | |
| 148 W. River Street Providence RI 02904-2615 | | | |
| HOPE | (401) 222-30 | | |
| 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>000910044</u> | | | |
| 2. Exact Name of the Limited Liability Company <u>SLN PROPERTIES, LLC</u> | | | |
| 3. State of Formation | | | |
| State: <u>RI</u> | | | |
| ARTICLE III | | | |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download | | | |
| the list of codes here. More information on NAICS can be found online. | | | |
| <u>531390</u> | | | |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island | | | |
| REAL ESTATE | | | |
| | | | |
| 5. Principal Office Addre | ISS . | | |
| | <u>MASSASOIT AVENUE</u> Γ 113 | | |
| | | tate: <u>RI</u> Zip: <u>02914</u> Coun | try: <u>USA</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: | | | |
| Contact Name: Contact Title: | | | |
| No. and Street: <u>400 MASSASOIT AVENUE</u> <u>UNIT 113</u> | | | |
| City or Town: <u>EAST PROVIDENCE</u> State: <u>RI</u> Zip: <u>02914</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 | Address | |
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip C | ode, Country |

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

DREW P. KAPLAN, ESQ. ONE PARK ROW, SUITE 300 PROVIDENCE , RI 02903

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 28 Day of November, 2017 at 10:42:23 AM 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 JAMIE LEGER

Signature of Authorized Person

Form No. 632 Revised 09/07

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