RI SOS Filing Number: 201856235350 Date: 1/16/2018 4:10:00 PM

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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2012
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.

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1, Entity ID Number	La Event nom	o of the Limited L	ighility Company				
000100040	2. Exact name of the Limited Liability Company Radiologic Leasing Associates, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531120	Own and manage Real Estate						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
215 Toll Gate Road			Warwick	RI	02886		
7. Mailing Address of Limited Lia	bility Compan	y and Name or Titl					
Contact Name Cathy Carr			Contact Title Operations Manager				
Street Address 215 Toll Gate Road			City Warwick	State RI	^{Zıp} 02886		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Anthony G. Bruzzese			Manager Name				
Street Address 215 Toll Gate Road			Streel Address				
^{City} Warwick	State RI	Zip 02886	City	State	Zìp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	<u> </u>			Check the box to it	ndicate an attachment		
9. Resident Agent in Rhode Islan	id. This informa	tion is currently of re	cord with the Department of S	tate. Changes require filin	g Form 642.		
Under penalty of perjury, I dec statements, and that all staten				ng any accompanyin	g schedules and		
Name of Authorized Person					1 1		
Anthony G. Bruzzese					179/17		
Signature of Authorized Person WHAT STREET 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 FILED

JAN 3 6 2018

FORM 632 - Reviséd: 08/2017