RI SOS Filing Number: 201860166350 Date: 3/12/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017 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.

1 Entity ID Number	2 Exact name of the Limited Liability Company					
164476	Bridgegate Square , LLC					
3 NAICS Code	4 Bnef description of the character of business conducted in Rhode Island					
531110	Owning and renting real estate					
5 State of Formation						
RI						
6. Principal Office Address			City	State	Zıp	
PO Box 384			Block Island	RI	02807	
7 Mailing Address of Limited Lia	bility Company a	and Name or Titl	-	<u> </u>		
Contact Name Cynthia Beebe			Contact Title Managing Member			
Street Address PO Box 384			City Block Island	State RI	^{Zıp} 02807	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Cynthia Beebe			Manager Name			
Street Address PO Box 384			Street Address			
City Block Island	State RI	Zip 02807	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zíp	City	State	Zìp	
Check the box to indicate an attachment						
9 Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all staten				g any accompanyin	g schedules and	
Name of Authorized Person				Date	1	
Cynthia T			2/2	77/56		
Signature of Authorized Person						
"my Detor						

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**

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BY

FORM 632 - Revised: 10/2017