



State of Rhode Island and Providence Plantations

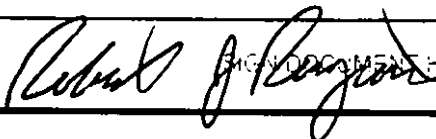
## Department of State - Business Services Division

**Annual Report for the year: 2018**  
**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 <b>1665686</b>		2. Exact name of the Limited Liability Company <b>ARR Retail Development, LLC</b>			
3. NAICS Code <b>531120</b>		4. Brief description of the character of business conducted in Rhode Island  <b>to own, develop, lease, sell and otherwise deal in real estate</b>			
5. State of Formation <b>Rhode Island</b>					
6. Principal Office Address <b>7 Ridge Road</b>		City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917-0000</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Robert J. Rongione</b>		Contact Title <b>Manager</b>			
Street Address <b>7 Ridge Road</b>		City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917-0000</b>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Robert J. Rongione</b>		Manager Name <b>Anthony R. Rongione</b>			
Street Address <b>7 Ridge Road</b>		Street Address <b>10 Pond View Court</b>			
City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917</b>	City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917</b>
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
Name of Authorized Person <b>Robert J. Rongione</b>			Manager		Date <b>09/04/2018</b>
Signature of Authorized Person 					

FILED

AUG 08 2018

BY 1016 DS

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov