s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.0
	Division Of Business 148 W. River S Providence RI 0290	reet	
HOPE	(401) 222-304		
imited Liability Com	pany		
Annual Report Filing Period: September 1	- November 1		
o file its annual report with	7-16-66(d), each limited liability comp in thirty (30) days after the time presc		
'6-66(b&c)) is subject to a			
ANNUAL REPORT YEAR:	2018		
<b>1. ID No.</b> <u>00133847</u>	1		
2. Exact Name of the Li	mited Liability Company <u>326 ME</u>	NDON RD, LLC	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
<u>531110</u>	e information on <u>NAICS</u> can be found	onine.	
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in R	hode Island
<u>THIS IS AN 8-UNIT RE</u>	ENTAL PROPERTY.		
5. Principal Office Addre	SS		
No. and Street: <u>99 H</u>	HARWOOD ROAD		
City or Town: <u>EAS</u>	ST GREENWICH State:	<u>RI</u> Zip: <u>02818</u> Cour	ntry: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Person:	
Contact Name: AMELIE	HENNESSY Contact Title:		
	BOX 1259 ST GREENWICH State: F	<u>RI</u> Zip: <u>02818</u> Coun	ntry: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab RS	ility Company, if Applicable	<b>}.</b>
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	Code, Country
MANAGER	JOSHUA SCOTT HENNESSY	99 HARWOOD R EAST GREENWICH, RI 02	-
MANAGER	ROSE-AMELIE HENNESSY	99 HARWOOD R	ROAD

EAST GREENWICH, RI 02818 USA

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

ROSE-AMELIE HENNESSY 99 HARWOOD ROAD EAST GREENWICH, RI 02818

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

**Signed this 13 Day of August, 2018 at 11:57:08 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 <u>AMELIE HENNESSY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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