State of Rhode Island and Providence Plantations Fee: \$50.00 Office of the Secretary of State			
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-30	treet)4-2615	
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: 2018			
1. ID No. <u>000123079</u>			
2. Exact Name of the Limited Liability Company 61 HAMILTON STREET REALTY, LLC			
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 <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>502000</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
REAL ESTATE INVESTMENTS AND RENTALS.			
5. Principal Office Address			
No. and Street: <u>65 WHITE PARKWAY</u> City or Town:NORTH SMITHFIELDState: RIZip: <u>02896</u> Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: <u>65 WHITE PARKWAY</u>			
City or Town: <u>NORTH SMITHFIELD</u> State: <u>RI</u> Zip: <u>02896</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	Addres	
MANAGER	First, Middle, Last, Suffix PAULINE G SAMBORSKY	Address, City or Town, State	· · · ·
		65 WHITE F NORTH SMITHFIELD,	

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

PAULINE G. SAMBORSKY 65 WHITE PARKWAY NORTH SMITHFIELD , RI 02896

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 August, 2018 at 8:13:10 PM 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 PAULINE SAMBORSKY

Signature of Authorized Person

Form No. 632 Revised 09/07

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