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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 70884	2. Exact name of the Limited Liability Company 145 MAIN STREET, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531110	OWNERSHIP AND MANAGEMENT OF INVESTMENT REAL ESTATE					
5. State of Formation	1					
RI						
6. Principal Office Address			City	State	Zip	
99 TUPELO STREET			BRISTOL	RI	02809	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Titk		·		
Contact Name EDWARD J COX II			Contact Title CFO			
Street Address 99 TUPELO STREET			City BRISTOL	State RI	^{Zip} 02809	
8. List ALL managers (names ar	nd addresses)	of the Limited Liab	oility Company, IF APPLICA	ABLE - DO NOT LIST N	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name		•	Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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				ing any accompanying	g schedules and	
Name of Authorized Person				Date	Date	
EDWARD J COX II				08/21/18	08/21/18	
Signature of Authorized Person SIGN DOCUMENT HERE						
Cottage Zer 4						

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

AUG 2 7 2018

FORM 632 - Revised: 10/2017

