3/1/1/P

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company					
000121504	R.K. Middletown 1, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
[ <u> </u>	Real Estate Dayslanment and Management					
5. State of Formation	Real Estate Development and Management					
RI						
				<del> </del>		
6. Principal Office Address			City	State	Zip	
c/o RK Centers, 50 Cabot Street, Suite 200			Needham	MA	02494	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name David Katz			Contact Title Manager			
Street Address c/o RK Centers, 50 Cabot Street, Suite 200		City Needham	State MA	<sup>Zip</sup> 02494		
8. List ALL managers (names ar	nd addresses) o	of the Limited Liab			MEMBERS	
Manager Name Raanan Katz			Manager Name David Katz			
Street Address c/o RK Centers, 50 Cabot Street, Suite 200		Street Address c/o RK Centers, 50 Cabot Street, Suite 200				
City Needham	State MA	<sup>Zip</sup> 02494	City Needham	State MA	<sup>Zip</sup> 02494	
Manager Name Sabra Katz			Manager Name			
Street Address c/o RK Centers, 50 Cabot Street, Suite 200			Street Address			
City Needham	State MA	<sup>Zip</sup> 02494	City	State	Zip	
		•	· ·	Check the box to in	ndicate 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 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.						
Name of Authorized Person Date						
David Katz						
Signature of Authorized Person SiGN DOCUMENT HERE						

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**SEP 0 4 2018

FORM 632 - Revised: 10/2017