RI SOS Filing Number: 201876990460 Date: 9/4/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of	State - Bu	siness Servi	ices Division			
Annual Report for the Limited Liability Com → Filing period: Septemb → Filing Fee: \$50.00 → Penalty: Additional \$25	pany er 1 - Novem	ber 1	ecember 1.			
1. Entity ID Number	2. Exact na	ame of the Limite	d Liability Company			
000/39564	COPI	COPPER BEECH KEALTY, LLC				
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island				
531120	10.	. //	. 0			
5. State of Formation	- KENT	TAL HOUS	E IN PROVI	SENCE 112		
RI				•		
6. Principal Olde Address			City	State	Zip	
23 HILL CREST ROAD			WAKEFIEL	S RI	02879	
7. Mailing Address of Limited	Liability Compa	any and Name or	Title of Contact Person			
SUSAN M. ME	SUSAN M. MEE HAN			Contact Title MEMBER		
Street Address 23 HILCRE ST	F ROAD		City WAKEFIE	4 State	Zip 2879	
8. List ALL managers (names			Liability Company, IF APPL	ICABLE - DO NOT LIST	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 i	indicate an attachment	
9. Resident Agent in Rhode Is	sland. This inform	nation is currently (of record with the Department of		-	
Under penalty of perjury, I o				uding any accompanyin	g schedules and	
statements, and that all sta-	tement <u>s conta</u>	ined nerein are	true and correct.			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone. (401) 222-3040 Website: www.sos.ri.gov

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SEP 0 4 2018

FORM 632 - Revised: 10/2017