s s	itate of Rhode Island and Prov Office of the Secretar		Fee: \$50.00
	Division Of Business	Services	
	148 W. River Str		
	Providence RI 02904		
HOPE	(401) 222-304)	
Limited Liability Comp Annual Report Filing Period: September 1 -			
In accordance with R.I.G.L. 7	7-16-66(d), each limited liability compar	v failing or refusing to	
	irty (30) days after the time prescribed		
ANNUAL REPORT YEAR:	2018		
1. ID No. <u>000526342</u>			
2. Exact Name of the Lim	ited Liability Company <u>FISKEVIL</u>	LE REALTY COMPANY II,	LLC
3. State of Formation			
State: <u>DE</u>			
	ARTICLE III		
list of codes <u>here.</u> More info <u>531120</u>	rmation on <u>NAICS</u> can be found online.		
4. Brief Description of the	Character of the Business Which is	Actually Conducted in Rhode	Island
REAL ESTATE HOLDIN	NG COMPANY		
5. Principal Office Addres	S		
·			
	CORPORATION TRUST COMPA		
<u>CORPORA</u> STREET	ATION TRUST CENTER, 1209 OF	ANUE	
City or Town: WILMING	TON	State: <u>DE</u> Zip: <u>19801</u>	Country: USA
6. Mailing Address of Lim	ited Liability Company and Name o	⁷ Title of Contact Person:	
Contact Name: Contact T	itle.		
		, INC.	
538 MAIN	STREET		
City or Town: FISKEVIL	<u>LE</u>	State: <u>RI</u> Zip: <u>02823</u> 0	Country: USA
7. Name and Address of E DO NOT LIST MEMBER	Each Manager of the Limited Liabili S	y Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	Code, Country

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

DOUGLAS G. GRAY, ESQ. 2800 FINANCIAL PLAZA PROVIDENCE, RI 02903

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

Signed this 17 Day of September, 2018 at 2:10:37 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 <u>LISA SCUNGIO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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