



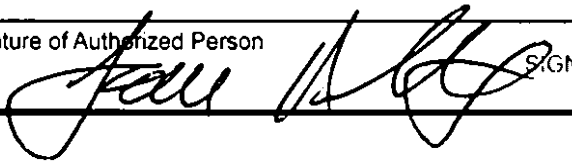
State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

STATE

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<br><b>760172</b>  |       | 2. Exact name of the Limited Liability Company<br><b>345 THAMES STREET, LLC</b>                   |                                       |                        |                                  |
| 3. NAICS Code<br><b>531390</b>  |       | 4. Brief description of the character of business conducted in Rhode Island<br><b>REAL ESTATE</b> |                                       |                        |                                  |
| 5. State of Formation<br><b>RI</b>  |       |   |                                       |                        |                                  |
| 6. Principal Office Address<br><b>122 TOURO STREET</b>  |       | City<br><b>NEWPORT</b>  |                                       | State<br><b>RI</b>     | Zip<br><b>02840</b>              |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |       |   |                                       |                        |                                  |
| Contact Name <b>TURNER C. SCOTT</b>   |       |   | Contact Title <b>REGISTERED AGENT</b> |                        |                                  |
| Street Address <b>122 TOURO STREET</b>  |       |   | City <b>NEWPORT</b>                   |                        | State <b>RI</b> Zip <b>02840</b> |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - 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 indicate an attachment <input type="checkbox"/>  |       |   |                                       |                        |                                  |
| 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.   |       |   |                                       |                        |                                  |
| <b>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.</b> |       |   |                                       |                        |                                  |
| Name of Authorized Person   |       |   |                                       | Date<br><b>9/17/18</b> |                                  |
| Signature of Authorized Person<br>   |       |   |                                       | 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](http://www.sos.ri.gov)

**FILED** *62*

SEP 26 2018

BY *30699*