RI SOS Filing Number: 201878422040 Date: 9/27/2018 4:00:00 PM

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

STAMP

**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 | 2. Exact name of the Limited Liability Company | | |
|---|---|---|---|
| 134920 | Rhode Island Medical Realty LLC | | |
| 3. NAICS Code<br>531120 | 4. Brief description of the character of business conducted in Rhode Island<br>Real Estate Management | | |
| 5. State of Formation<br>RI | | | |
| 6. Principal Office Address<br>6 Blackstone Valley Place #502 | City<br>Lincoln | State<br>RI | Zip<br>02865 |

| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
|---|---|---|---|
| Contact Name Din Shih | Contact Title | | |
| Street Address 116 Rangelery Road | City Brookline | State MA | Zip 02467 |

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 ☐

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 |
|---|---|
| Din Shih | 9/24/2018 |

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 27 2018
BY 540

FORM 632 - Revised: 10/2017