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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 nan	2. Exact name of the Limited Liability Company					
136006	Solom	Solomon Management, LLC					
3. NAICS Code	4. Brief desc	Brief description of the character of business conducted in Rhode Island					
531311	Manage rea	Manage real estate.					
5. State of Formation							
Rhode Island							
6 Principal Office Address			City	State	Zıp		
60 Slater Avenue			Providence	RI	02906		
7 Mailing Address of Limited		y and Name or Tit					
Contact Name Janice A. Solomon			Contact Title Manager				
Street Address 60 Slater Avenue Cit			City Providence	State RI	^{Zip} 02906		
8. List ALL managers (name		of the Limited Lia	bility Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS		
Manager Name Janice A. Solomon		Manager Name					
Street Address 60 Slater Avenue		Street Address					
^{City} Providence	State RI	Zip 02906	City	State	Zıp		
Manager Name			Manager Name				
Street Address		Street Address					
City	State	Ζιρ	City	State	Zıp		
		<u>I</u>	_	Check the box to	ndicate an attachment		
9. Resident Agent in Rhode	Island. This informa	ation is currently of re	ecord with the Department of Sta	ite. Changes require filir	ng Form 642.		
Under penalty of perjury, I statements, and that all sta			nmined this report, including and correct.	g any accompanyin	g schedules and		
Name of Authorized Person				Date	1		
Janice A. Solomon, Manager			9/28/	9/28/18			
Signature of Authorized Pers		a. SIGN F	OCUMENT HERE	•			
Janice a. Salon	um, manag	U SIGN L					

MAIL TO:

Division of Business Services

148 W. River Street, Providence Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri.gov