s s	tate of Rhode Island and Pro Office of the Secreta		S Fee: \$50.00
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-30	treet)4-2615	
Limited Liability Com Annual Report			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc		
ANNUAL REPORT YEAR:	<u>2018</u>		
1. ID No. <u>00048835</u>	<u> </u>		
2. Exact Name of the Limited Liability Company HOGAN LAW ASSOCIATES LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>541110</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted	in Rhode Island
GENERAL PRACTICE	<u>OF LAW</u>		
5. Principal Office Addre	SS		
	VEST EXCHANGE STREET		
City or Town: <u>PROV</u>	<u>IDENCE</u>	State: <u>RI</u> Zip: <u>02903</u>	<u>3</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
No. and Street: ONE W	RET SWEENEY Contact Title: /EST EXCHANGE STREET		
City or Town: <u>PROVI</u>	<u>JENCE</u>	State: <u>RI</u> Zip: <u>0290</u>	<u>3</u> Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addre	ss
	First, Middle, Last, Suffix	Address, City or Town, Sta	te. Zip Code. Country

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

CAROLYN M. MURRAY THE PROVIDENCE-WESTIN DOME BUILDING ONE WEST EXCHANGE STREET, 3RD FLOOR 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 5 Day of October, 2018 at 9:53:28 AM 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>MARGARET SWEENEY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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