s	tate of Rhode Island and Pro Office of the Secreta	
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 14-2615
Limited Liability Com	pany	
Annual Report		
Filing Period: September 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc	
16-66(b&c)) is subject to a	penalty fee of \$25.00.	
ANNUAL REPORT YEAR:	<u>2018</u>	
1. ID No. <u>001662042</u>	2	
2. Exact Name of the Li	mited Liability Company Sunset H	ill, L.L.C.
3. State of Formation		
State: <u>RI</u>		
	ARTICLE III	
•	Code that best describes the primary e information on <u>NAICS</u> can be found	business conducted by the entity. Download online.
<u>531311</u>		
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode Island
RESIDENTIAL REAL F	ESTATE PROPERTY MANAGEM	IENT.
5. Principal Office Addre	SS	
No. and Street: 372 S	SUNSET HILL ROAD	
<u>P.O.</u>	BOX 325	
City or Town: <u>BLO</u>	CK ISLAND Sta	te: <u>RI</u> Zip: <u>02807</u> Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Person:
	COLE Contact Title: MEMBER	
	S <u>UNSET HILL ROAD</u> BOX 325	
		e: <u>RI</u> Zip: <u>02807</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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, 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

JOSHUA COLE 372 SUNSET HILL ROAD P.O. BOX 325 BLOCK ISLAND, RI 02807

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

Signed this 19 Day of November, 2018 at 10:04:52 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 JOSHUA C COLE

Signature of Authorized Person

Form No. 632 Revised 09/07

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