s s	tate of Rhode Island and Pro Office of the Secreta		ns Fee: \$50.00
	Division Of Business	Services	
	148 W. River S		
	Providence RI 0290		
HOPE	(401) 222-304	+0	
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2018			
1. ID No. <u>000155752</u>			
2. Exact Name of the Limited Liability Company <u>405QL HOLDINGS, LLC</u>			
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 <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>531190</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
OWN AND LEASE REAL ESTATE			
5. Principal Office Addre	SS		
No. and Street: PO I	ROX 1800		
	<u>BOX 1890</u> RTH KINGSTOWN State	: <u>RI</u> Zip: <u>02852</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: EDWARD TARBOX Contact Title: AUTHORIZED PERSON			
No. and Street: <u>PO BOX 1890</u> City or Town: NORTH KINGSTOWN State: RI Zip: 02852 Country: USA			
Gig of Town. <u>NOT THANGOTOWIN</u> Glate. <u>IN</u> ZIP. <u>02052</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	Addr	ess
	First, Middle, Last, Suffix	Address, City or Town, S	tate, 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 L. CELESTE, ESQ. ONE FINANCIAL PLAZA, SUITE 1800 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 30 Day of November, 2018 at 3:14:34 PM 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 EDWARD P. TARBOX, AUTHORIZED REPRESENTATIVE

Signature of Authorized Person

Form No. 632 Revised 09/07

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