RI SOS Filing Number: 201984743640 Date: 1/18/2019 4:00:00 PM

State of Rhode Isl	land and Providen	ce Plantations					
Department of State - Business Services Division					20	()	
					€3 7 6	유민	
Annual Barant for the years 2018						"'~~~	
Annual Report for the year: 2018 Limited Liability Company					SECRETOR OF		
→ Filing period: September 1 - November 1					υ ς :ι	· ====================================	
→ Filing Fee: \$50.00	IIIO I - NOVEIII	50. 1			72	문위	
> Penalty: Additional \$25.00 fee if form is not filed by December 1.					25	무당	
Entity ID Number 2. Exact name of the Limited Liability Company						 	
1341075		Providence Realty Advisors LLC				111	
3. NAICS Code	4. Brief de:	4. Brief description of the character of business conducted in Rhode Island					
531110	to operate	to operate & manage a real estate business, including the purchasing, selling, leasing,					
5. State of Formation	mortgagin	mortgaging, marketing, improving, maintaining & managing real estate					
Rhode Island	ĺ						
6. Principal Office Address			City	State	Zip		
160 Chestnut St 3E			Providence	RI	02903		
7 Malling Address of Limits	ed Liability Comps	ny and Name or	Title of Contact Person		<u> </u>		
7. Malling Address of Limited Liability Company and Name or T Contect Name Dustin Dezube			Contact Title				
Street Address 150 Chestnut St 3E			City Providence	State RI	Zip 02903		
8. List ALL managers (nam	nes and addresse	s) of the Limited L	iability Company, IF APPLICAE	BLE - DO NOT LIST N	MEMBERS		
Manager Name Dustin Dezube			Manager Name				
Street Address 150 Chestnut St 3E			Street Address	Street Address			
ciny Providence	State RI	ZIp 02903	City 3	State	Zip JA	RPC RPC	
Manager Name			Manager Name	Manager Name — NAME NAME NAME NAME NAME NAME NAME NAME			
Street Address			Street Address P CONT				
City	State	Zip	City	State	Zip 👼	Or or	
•						<u> </u>	
				Check the box to in		chmep#	
			record with the Department of Sta		•	d	
unger peneny or perjury, statements, and that all s			camined this report, including rue and correct.	g any accompanying	, schedules a	nu	
Name of Authorized Person				Date	/		
Dustin Dezube				1/3/	1211		

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

Signature of Authorized Person

JAN 18 2019 13:42
BY KL 2009

FORM 632 - Revised: 10/2017