STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
***Matthew A. Brown**, Secretary of State*

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1** • **Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No.	2. Exact name of the limited liability company
73527	QUEEN REALTY LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	REAL ESTATE

5. Principal office address	City	State	Zip
see #8			

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
MICHAEL B. SHORE	MEMBER

Street Address	City	State	Zip
see #8			

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE
FILL IN SPACES BEFORE USING ATTACHMENTS ***("X" BOX FOR ATTACHMENT)*** ☐
ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52

Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Agent Name	Address	
MICHAEL B. SHORE		
Address	City	Zip
612 ELMGROVE AVENUE	PROVIDENCE	02906

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

File Date	9/13/05 *73527*
Check No.	1930
By:	DA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Signature of Authorized Person *Date* 9/9/05

MICHAEL B. SHORE
Print or Type Name of Authorized Person

Form 632 Rev. 7/03

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
***Matthew A. Brown**, Secretary of State*

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No.	2. Exact name of the limited liability company
73527	QUEEN REALTY LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	REAL ESTATE

5. Principal office address	City	State	Zip
612 ELMGROVE AVE	PROV	RI	02906

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
MICHAEL B. SHORE	MEMBER

Street Address	City	State	Zip
ABOVE			

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE
FILL IN SPACES BEFORE USING ATTACHMENTS *("X" BOX FOR ATTACHMENT)* ☐
ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52

Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Agent Name	Address	
MICHAEL B. SHORE		
Address	**City**	**Zip**
612 ELMGROVE AVENUE	PROVIDENCE	02906

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

* 7 3 5 2 7 *

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Signature of Authorized Person *Date* 10/11/04

MICHAEL B. SHORE
Print or Type Name of Authorized Person

File Date 10-12-04
Check No. 1854
By: AMF
FOR SECRETARY OF STATE USE ONLY

Form 632 Rev. 7/03

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No.	2. Exact name of the limited liability company
73527	QUEEN REALTY LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	REAL ESTATE

5. Principal office address	City	State	Zip
612 ELMGROVE AVE	PROVIDENCE	RI	02906

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
MICHAEL SHORE	MEMBER & AGENT

Street Address	City	State	Zip
612 ELMGROVE AVE	PROVIDENCE	RI	02906

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE
FILL IN SPACES BEFORE USING ATTACHMENTS *("X" BOX FOR ATTACHMENT)* ☐
ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52

Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Agent Name	Address	
MICHAEL B. SHORE		
Address	**City**	**Zip**
612 ELMGROVE AVENUE	PROVIDENCE	02906

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

* 7 3 5 2 7 *

File Date	10/14/03
Check No.	1768
By:	DA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Signature of Authorized Person *Date* 10/7/03

MICHAEL SHORE
Print or Type Name of Authorized Person

Form 632 Rev. 7/03

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 ● Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No.	2. Exact name of the limited liabilty company
73527	QUEEN REALTY LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	REAL ESTATE

5. Principal office address	City	State	Zip
612 ELMGROVE AVE	PROV	RI	02906

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
MICHAEL B. SHORE	MEMBER

Street Address	City	State	Zip
612 ELMGROVE AVE	PROV	RI	02906

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE

FILL IN SPACES BEFORE USING ATTACHMENTS *("X" BOX FOR ATTACHMENT)* ☐

ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52

Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Agent Name	Address	
MICHAEL B. SHORE		
Address	City	Zip
612 ELMGROVE AVENUE	PROVIDENCE	02906

This report must be signed in ink by an authorized person pursuant to 7-16-66.

* 7 3 5 2 7 *

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

10/4/02

Signature of Authorized Person *Date*

MICHAEL B. SHORE

Print or Type Name of Authorized Person

File Date	10-9-02
Check No.	11699
By:	AMF

FOR SECRETARY OF STATE USE ONLY

Form 632 Rev. 6/02

Filing Fee: $50.00

To be filed annually between September 1 and November 1

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 73527 **Annual Report for the year** 2001

1. The name of the limited liability company is:

   QUEEN REALTY LLC

2. The address of the principal office of the limited liability company is:

   612 ELMGROVE AVE, PROVIDENCE RI 02906

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: MICHAEL B. SHORE

   612 ELMGROVE AVENUE PROVIDENCE RI 02906

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: (MEMBER) MICHAEL B. SHORE 612 ELMGROVE AVE PROV. RI 02906

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: REAL ESTATE

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	*Address*

Dated 22 SEPTEMBER 2001

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Exact Name of Limited Liability Company
QUEEN REALTY LLC

By MICHAEL B. SHORE

MEMBER
Title

7 3 5 2 7

FOR SECRETARY OF STATE USE ONLY	
File Date:	9-25-01
Check No.:	1619
By:	

Form No. 632
Revised 01/99

DETACH BOTTOM BEFORE RETURNING

Please detach and mail the above section including payment in the amount of $50.00 made payable to Secretary of State. If the registered office and/or registered agent indicated below has changed, Form 642 must be filed in this office. Forms may be

Filing Fee: $50.00

To be filed annually between September 1 and November 1

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number DLLC 73527 **Annual Report for the year** 2000

1. The name of the limited liability company is:

   QUEEN REALTY LLC

2. The address of the principal office of the limited liability company is:

   612 ELMGROVE AVE. PROV RI 02906

3. The state or other jurisdiction under the laws of which it is formed is RHODE ISLAND

4. The name and address of its resident agent is: MICHAEL B. SHORE

   612 ELMGROVE AVENUE PROVIDENCE RI 02906

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 612 ELMGROVE AVE PROV RI. 02906
   MICHAEL B. SHORE

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: REAL ESTATE

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	*Address*
MICHAEL B. SHORE	612 ELMGROVE AVE PROV RI 02906

Dated 9/1/00

7 3 5 2 7

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

QUEEN REALTY LLC
Exact Name of Limited Liability Company

By [signature]

MEMBER & AGENT
Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	9/12
Check No.:	1540
By:	[illegible]

Form No. 632
Revised 01/99

Filing Fee: $50.00

To be filed annually between
September 1 and November 1

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

ID Number 0073527

Annual Report for the year 1999

1. The name of the limited liability company is:

   Queen Realty LLC

2. The address of the principal office of the limited liability company is:

   612 Elmgrove Avenue, Providence, RI 02906

3. The state or other jurisdiction under the laws of which it is formed is: Rhode Island

4. The name and address of its resident agent is: Michael Shore, 612 Elmgrove Avenue, Providence, RI 02906

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Michael Shore, 612 Elmgrove Avenue, Providence, RI 02906

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	*Address*
Michael Shore	612 Elmgrove Avenue, Providence, RI 02906

Dated 17 November, 1999

PAID LO 231945
DEC 01 1999
SEC'Y OF STATE

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Queen Realty LLC
Exact Name of Limited Liability Company

By [signature], agent

Michael Shore, Agent
Title

Form No. LLC-19
Revised 8/97

Filing Fee: $50.00

To be filed annually between
September 1 and November 1

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

ID Number 0073527

Annual Report for the year 1998

1. The name of the limited liability company is:

   Queen Realty LLC

2. The address of the principal office of the limited liability company is:

   612 Elmgrove Avenue, Providence, RI 02906

3. The state or other jurisdiction under the laws of which it is formed is: Rhode Island

4. The name and address of its resident agent is: Michael Shore, 612 Elmgrove Avenue, Providence, RI 02906

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: Michael Shore, 612 Elmgrove Avenue, Providence, RI 02906

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: real estate

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	*Address*
Michael Shore	612 Elmgrove Avenue, Providence, RI 02906

Dated 17 November, 1999

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Queen Realty LLC
Exact Name of Limited Liability Company

By _____, agent

Michael Shore, Agent
Title

PAID
DEC 01 1999
SEC'Y OF STATE

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
DEC 1 1 21 PM '99

Form No. LLC-19
Revised 8/97

Filing Fee: $50.00

To be filed annually between September 1 and November 1

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

ID Number 0073527

Annual Report for the year 1997

1. The name of the limited liability company is:

   QUEEN REALTY LLC

2. The address of the principal office of the limited liability company is:

   1 TALL PINES DR., BARRINGTON RI 02806

3. The state or other jurisdiction under the laws of which it is formed is: RI

4. The name and address of its resident agent is: MICHAEL SHORE (ABOVE ADDRESS)

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: ABOVE ADDRESS — MICHAEL SHORE

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: REAL ESTATE

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	*Address*

Dated 9/1, 1997

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

QUEEN REALTY LLC
Exact Name of Limited Liability Company

By [signature]

agent
Title

PAID
SEP 23 1997
SEC'Y OF STATE

Form No LLC-19
Revised 8/97

Office of the Secretary of State
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D.# 73527

Annual Report for the year **1996**

FIRST: The name of the limited liability company is: **QUEEN REALTY LLC**

SECOND: The address of the principal office of the limited liability company is:

1 TALL PINES DR, BARRINGTON RI 02806

THIRD: The state or other jurisdiction under the laws of which it is formed is: **Rhode Island**

FOURTH: The name and address of its resident agent is:

MICHAEL B. SHORE
1 TALL PINES DR. BARRINGTON RI 02806

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

1 TALL PINES DR. BARRINGTON RI 02806
MICHAEL B. SHORE, AGENT

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:

REAL ESTATE

Dated 9/7 19 96

QUEEN REALTY LLC
Exact Name of Limited Liability Company

File Date:	9/10
Check No:	332
By:	KM

For Secretary of State Use Only

*By [signature]
*To be signed in the manner required by the home state.

Title AGENT

FORM LLC-19 7/95

MICHAEL B. SHORE
1 TALL PINES DRIVE
BARRINGTON, RI 02806

[illegible]

[illegible]

[illegible]

Filing Fee: $50.00

To be filed annually between
September 1 and November 1

State of Rhode Island and Providence Plantations
Office of the Secretary of State
Corporation Division
100 North Main Street
Providence, RI 02903-1335

LIMITED LIABILITY COMPANY

LLC I.D. # 0073527

Annual Report for the year 1995

FIRST: The name of the limited liability company is:

QUEEN REALTY LLC

SECOND: The address of the principal office of the limited liability company is:

1 TALL PINES DR.
BARRINGTON RI 02806

THIRD: The state or other jurisdiction under the laws of which it is formed is:

RI

FOURTH: The name and address of its resident agent is:

MICHAEL B. SHORE
1 TALL PINES DR. BARRINGTON RI 02806

FIFTH: The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are:

MICHAEL B. SHORE
1 TALL PINES DR. BARRINGTON RI 02806

SIXTH: A brief statement of the character of the business in which the corporation is actually engaged in this state:

REAL ESTATE

Dated SEPT 1, 1995

QUEEN REALTY LLC
Exact Name of Limited Liability Company

*By [signature]

Title AGENT

FILED
SEP 11 1995
By CC 259

*To be signed in the manner required by the home state.

FORM LLC-19 7/95

MICHAEL B. SHORE

1 TALL PINES DRIVE
BARRINGTON RI 02806

Filing Fee $50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations

Office of The Secretary of State

100 North Main Street
Providence, Rhode Island 02903-1335
401-277 3040

Ch# 168 MMC

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: C073527 Annual Report for the year: 1994

Name of Business Entity: QUEEN REALTY LLC

Business entity organized under the laws of the State of: RI

Federal Taxpayer Identification Number

For foreign entity, address and telephone number of principal office:

N/A

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

1 TALL PINES DR.
BARRINGTON RI 02806

Phone: (401) 245-8943

Business Entity is (check one):

[ ] Business Corporation (See RIGL Chapter 7-1.1)
[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
[✓] Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

MICHAEL B. SHORE PRES.
1 TALL PINES DR.
BARRINGTON
RI. 02806

Brief statement of the character of business conducted in Rhode Island:

REAL ESTATE

Date of Organization: 08/12/1993

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
☐ CHIEF EXECUTIVE OFFICER OR ✓ PRESIDENT (Check One) MICHAEL B. SHORE	1 TALL PINES DR.	BARRINGTON RI	02806
☐ CHIEF OPERATING OFFICER OR ✓ VICE PRESIDENT (Check One) RYANE S. SHORE	SAME		
☐ CUSTODIAN OF RECORDS OR ✓ SECRETARY (Check One) MICHAEL B. SHORE	SAME		
☐ CHIEF FINANCIAL OFFICER OR ✓ TREASURER (Check One) MICHAEL B. SHORE	SAME		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 100	NUMBER 100
CLASS COMMON	CLASS COMMON
SERIES N/A	SERIES N/A
PAR VALUE OR WITHOUT PAR	PAR VALUE OR WITHOUT PAR

PAID
OCT 04 1994
SEC'Y OF STATE

Date: Sept. 1, 1994

By: Michael B. Shore

MICHAEL B. SHORE
PRINT OR TYPE NAME OF OFFICER SIGNING

PRESIDENT
TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

MICHAEL B. SHORE
1 TALL PINES DRIVE
BARRINGTON RI 02806