

Annual Report for the year: 2018
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

FILED	
JUN 03 2019	02
1214	

1. Entity ID Number	2. Exact n	2. Exact name of the Limited Liability Company					
1673151	Cliffs	Cliffside Properties, LLC					
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island					
531110	Real Esta	Real Estate					
5. State of Formation	7						
Rhode Island			•	•	•		
6. Principal Office Address			City	State	Zip		
1341 Middle Road			East Greenwich	RI	02818		
7. Mailing Address of Limited	Liability Compa	any and Name o					
Contact Name James R. Kenn	edy		Contact Title Member				
Street Address 1341 Middle Road			City East Greenwich	State RI	^{Zip} 02818		
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name	l		Manager Name				
Street Address	 		Street Address				
City	State	Zíp'	City	State	Zip		
	L <u>, ,,,,</u>	 l		Check the box to i	ndicate an attachment		
9. Resident Agent in Rhode Is	land. This inform	nation is currently	of record with the Department of State.	Changes require filin	ng Form 642.		
Under penalty of perjury, I d statements, and that all stat			examined this report, including a true and correct.	any accompanyin	g schedules and		
Name of Authorized Person Date , ,							
James R. Kennedy				5/30/	19		
Signature of Authorized Perso	n	SIG	N 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