RI SOS Filing Number: 201997238780 Date: 6/17/2019 12:23:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS: DIVALIP

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Annual Report for the year: 2017 **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.

1. Entity ID Number 000517966	I	2. Exact name of the Limited Liability Company Summa Company, LLC				
3. NAICS Code 237210	I	Brief description of the character of business conducted in Rhode Island To engage in investment of Real Estate and Interests Therein				
5. State of Formation RI						
6. Principal Office Address 678 George Washington HWY			City Lincoln	State RI	Zip 02865	
7. Mailing Address of Limited L	_iability Compa	any and Name or	Title of Contact Person			
Contact Name Eric Yeghian			Contact Title Authorized Person			
Street Address 678 George Washington HWY			City Lincoln	State RI	^{Zip} 02865	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLIC	ABLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
<u> </u>	_1			Check the box to i	indicate an attachment	
9. Resident Agent in Rhode Isl	and, This inform	mation is currently	of record with the Department of S			
Under penalty of perjury, I destatements, and that all state	eclare and aff ements conta	firm that I have dined herein are	examined this report, includ true and correct.	ing any accompanyin	g schedules and	
Name of Authorized Person				Date		
Eric Yeghlan				6/17/2019		
Signature of Authorized Person		SIGI	N DOCUMENT HERE			
	- / ` `				. n . 1 :	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 632 - Revised: 10/2017