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2019 JUL 29 PM 12: J. 197 14.

Annual Report for the year: 2019 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.

| Entity ID Number | 2. Exact nam | 2. Exact name of the Limited Liability Company | | | | |
|--|--|--|---|---------------------------------------|-----------------------------|--|
| 844034 | Off Broadway Properties, LLC | | | | | |
| 3. NAICS Code | Brief description of the character of business conducted in Rhode Island | | | | | |
| 711130 ar | To own, operate, lease, rent, sell, and manage Real Estate | | | | | |
| 5. State of Formation | | | | | | |
| RI | | | | · · · · · · · · · · · · · · · · · · · | , | |
| 6. Principal Office Address | | | City | State | Zip | |
| 1080 Main Street | | | Pawtucket | RI | 02860 | |
| 7. Mailing Address of Limited Lia | bility Compan | y and Name or | | | | |
| Contact Name Jason Shechtman | | | Conlact Title Member | | | |
| Street Address PO Box 41567 | | | City Providence | State RI | ^{Zip} 02940 | |
| 8. List ALL managers (names a | nd addresses) | of the Limited | Liability Company, IF APPLICAE | BLE - DO NOT LIST | 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 | Zip | City | State | Zıp | |
| <u> </u> | | | | Check the box to | indicate an attachment | |
| 9. Resident Agent in Rhode Isla | nd. This informa | ation is currently | of record with the Department of Sta | ale. Changes require fili | ng Form 642. | |
| Under penalty of perjury, I dec statements, and that all states | lare and affir nents contair | rm that I have ned herein are | examined this report, including true and correct. | ig any accompanyir | ng schedules and | |
| Name of Authorized Person Jason Shechtman Date 7 | | | | | | |
| Signature of Authorized Person | Ž L ^ | SIG | N DOCUMENT HERE | | -··· • · · · - | |
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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED JUL 2 9 2019

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