S	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 14-2615	
HOPE	(+01) 222-30-	10	
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2019			
1. ID No. <u>000967733</u>			
2. Exact Name of the Limited Liability Company <u>LINCOLN ARCHITECTURE LLC</u>			
3. State of Formation			
State: MA			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>541310</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
ARCHITECTURAL DESIGN FIRM			
5. Principal Office Address			
No. and Street: <u>1 MOUNT VERNON STREET, SUITE 203</u>			
City or Town: <u>WINCH</u>		State: <u>MA</u> Zip: <u>01890</u> Co	ountry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>COLLEEN QUAILE</u> Contact Title: <u>SR MANAGER</u> No. and Street: <u>1 MOUNT VERNON STREET, SUITE 203</u> SUITE 203			
City or Town: WINCHE		State: MA Zip: 01890Co	ountry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country
MANAGER	DANIEL R. QUAILE	1 MOUNT VERNON STREET	. SUITE 203

MANAGER

COLLEEN QUAILE

WINCHESTER, MA 01890 USA

1 MOUNT VERNON STREET WINCHESTER, 01890 US

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

PARASEARCH, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 23 Day of August, 2019 at 11:29:40 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DANIEL R QUAILE

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2019 State of Rhode Island and Providence Plantations All Rights Reserved