s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.0
	Division Of Business 148 W. River S Providence RI 0290	treet	
HOPE	(401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2019</u>		
1. ID No. <u>000080792</u>	2		
2. Exact Name of the Lin INTERNATIONAL, LL	mited Liability Company <u>COAST</u>	AL RESORTS HOLDING	<u>as</u>
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
	Code that best describes the primary e information on <u>NAICS</u> can be found		entity. Download
<u>531331</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in	Rhode Island
<u>REAL ESTATE</u>			
5. Principal Office Addre	SS		
	<u>NATIONAL HOTEL</u> BOX 189		
		e: <u>RI</u> Zip: <u>02807</u> Co	ountry: <u>USA</u>
6. Mailing Address of Lir	nited Liability Company and Name	or Title of Contact Perso	n:
No. and Street: THE	JLLER Contact Title: <u>GENERAL M/</u> NATIONAL HOTEL	<u>NAGER</u>	
	BOX 189 CK ISLAND State	:: <u>RI</u> Zip: <u>02807</u> Co	ountry: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBEI	Each Manager of the Limited Liab RS	ility Company, if Applicab	ble.
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Z	Zip Code, Country

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

JULIE FULLER PO BOX 189 36 WATER STREET BLOCK ISLAND, RI 02807

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

Signed this 3 Day of September, 2019 at 9:36:24 PM 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 <u>JULIE R FULLER</u> Signature of Authorized Ba

Signature of Authorized Person

Form No. 632 Revised 09/07

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