

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.

FILED

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1. Entity ID Number 1071456	2. Exact name of the Limited Liability Company 365 Parking Providence, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island Real estate management and any and all lawful activities permitted in accordance with the Rhode Island Limited Liability Company Act.					
531312						
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
1140 Reservoir Avenue			Cranston	RI	02920	
7. Mailing Address of Limited Li		any and Name or	Title of Contact Person			
Contact Name James A. Procaccianti			Contact Title Authorized Signatory			
Street Address 1140 Reservoir Avenue			City Cranston	State RI	Zip 02920	
8. List ALL managers (names a	nd addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Islan	nd. This inform	nation is currently o	of record with the Department of Sta	ate. Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all states	lare and aff. pents contain	irm that I have e ined herein are	examined this report, including true and correct.	ng any accompanying	g schedules and	
Name of Authorized Person				Date		
James A. Procaccianti				Date 9-9-1	'9	
Signature of Authorized Person SIGN 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