s S	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River S Providence RI 0290		
HOPE	(401) 222-304		
Limited Liability Com	nany		
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>000130130</u>			
2. Exact Name of the Limited Liability Company <u>FALKENBERRY PROPERTIES, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download			
the list of codes here. More information on NAICS can be found online.			
<u>531120</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
OWN AND MANAGE COMMERCIAL REAL ESTATE			
5. Principal Office Addre	255		
No. and Street: <u>135 P</u>	LAIN STREET, UNIT 204		
City or Town: PROV	<u> IDENCE</u>	State: <u>RI</u> Zip: <u>02905</u> Country	: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: STEPHEN S. FALKENBERRY Contact Title: MANAGER			
	<u>LAIN STREET, UNIT 204</u> 'IDENCE S	tate: RI Zip: 02905 Country	: USA
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 Code,	Country
MANAGER	STEPHEN S FALKENBERRY	235 PLAIN STREET, UNIT 2 PROVIDENCE, RI 02905- USA	04

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

SHEILA M. COOLEY, ESQ. 178 DIVISION STREET EAST GREENWICH, RI 02818

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

Signed this 19 Day of September, 2019 at 9:02:27 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 STEPHEN S. FALKENBERRY

Signature of Authorized Person

Form No. 632 Revised 09/07

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