	ate of Dhe de Jelend and Dre	uiden es Disatetiens	-
Si Si	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River St		
Providence RI 02904-2615 (401) 222 2040			
HOPE	(401) 222-30	40	
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. 000869897			
2. Exact Name of the Limited Liability Company <u>ARC CAFEHLD001, LLC</u>			
3. State of Formation			
State: <u>DE</u>			
ARTICLE III			
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>525990</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
REAL ESTATE INVESTMENT AND ANY OTHER LAWFUL BUSINESS			
5. Principal Office Address			
No. and Street:2325 E. CAMELBACK ROAD, SUITE 1100City or Town:PHOENIXState:AZZip:85016Country:USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 2325 E. CAMELBACK ROAD, SUITE 1100 City or Town: PHOENIX State: AZ Zip: 85016 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 Co	ode, Country
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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 October, 2019 at 12:15:39 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>KELLY LETTMANN</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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