RI SOS Filing Number: 201922656120 Date: 10/3/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2019 OCT -3 P 2: 27

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.

1. Entity ID Number 160172	2. Exact name of the Limited Liability Company 799 Hope Street Associates, LLC					
3. NAICS Code 531120	Brief description of the character of business conducted in Rhode Island Real estate management and leasing					
5. State of Formation RI						
6. Principal Office Address 143 Smithfield Road			City North Providence	State RI	Zip 02904	
7. Mailing Address of Limited Lia	ibility Compar	y and Name or Title				
Contact Name Azarig Kooloian			Contact Title Manager			
Street Address 143 Smithfield Road			City North Providence	State RI	^{Zip} 02904	
8. List ALL managers (names a	nd addresses)	of the Limited Liab	ility Company, IF APPLICABLE	- DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all stater			• •	iny accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Azarig Kooloian				10/03/19	10/03/19	
Signature of Authorized Person	· ·	SIGN D	OCUMENT 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 FILED

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FORM 632 - Revised: 10/2017