S	tate of Rhode Island and Pro Office of the Secreta		ONS Fee: \$50.00
	Division Of Business 148 W. River St Providence RI 0290	reet	
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>001687017</u>	7		
2. Exact Name of the Li	mited Liability Company <u>3GB LL</u>	<u> </u>	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
the list of codes here. More	ARTICLE III Code that best describes the primary e information on <u>NAICS</u> can be found		by the entity. Download
the list of codes <u>here.</u> More <u>531110</u>	Code that best describes the primary e information on <u>NAICS</u> can be found	online.	
the list of codes <u>here.</u> More <u>531110</u>	Code that best describes the primary	online.	
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the list of codes <u>here.</u> More <u>531110</u> 4. Brief Description of th <u>LEASING OF RESIDEN</u> 5. Principal Office Addre No. and Street: <u>54</u>	Code that best describes the primary e information on <u>NAICS</u> can be found e Character of the Business Which <u>VTIAL REAL ESTATE.</u>	online.	
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the list of codes here. More <u>531110</u> 4. Brief Description of th <u>LEASING OF RESIDEN</u> 5. Principal Office Addre No. and Street: <u>54</u> City or Town: <u>BA</u> 6. Mailing Address of Lir Contact Name: <u>MICHAE</u> No. and Street: <u>54 (City or Town: BAF</u>) 7. Name and Address of	Code that best describes the primary e information on NAICS can be found e Character of the Business Which VTIAL REAL ESTATE. ss CHAPIN ROAD RRINGTON State: R mited Liability Company and Name L MEECH Contact Title: CHAPIN ROAD RRINGTON State: RI CHAPIN ROAD RRINGTON State: RI Each Manager of the Limited Liab RS Individual Name	online. is Actually Conduct <u>I</u> Zip: <u>02806</u> or Title of Contact I Zip: <u>02806</u> ility Company, if Ap Add	ted in Rhode Island Country: <u>USA</u> Person: Country: <u>USA</u> pplicable.
the list of codes here. More <u>531110</u> 4. Brief Description of th <u>LEASING OF RESIDEN</u> 5. Principal Office Addre No. and Street: <u>54</u> City or Town: <u>BA</u> 6. Mailing Address of Lir Contact Name: <u>MICHAE</u> No. and Street: <u>54 (C</u> City or Town: <u>BAF</u> 7. Name and Address of DO NOT LIST MEMBER	Code that best describes the primary e information on NAICS can be found e Character of the Business Which with the state of the Business Which NTIAL REAL ESTATE. ss CHAPIN ROAD NRINGTON State: R mited Liability Company and Name L MEECH Contact Title: CHAPIN ROAD RINGTON State: RI Each Manager of the Limited Liab	is Actually Conduct I Zip: 02806 or Title of Contact I Zip: 02806 ility Company, if Ap Address, City or Town,	ted in Rhode Island Country: <u>USA</u> Person: Country: <u>USA</u> pplicable.

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

MICHAEL MEECH 54 CHAPIN ROAD BARRINGTON, RI 02806

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

Signed this 4 Day of October, 2019 at 1:25:57 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>MICHAEL MEECH</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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