S	tate of Rhode Island and P Office of the Secre		ons Fee: \$50.00
	Division Of Busin 148 W. River Providence RI 02	Street	
HOPE	(401) 222-3	3040	
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. <u>000127816</u>			
2. Exact Name of the Limited Liability Company FC ASHTON MILL LESSOR, LLC			
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 <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>531390</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
REAL ESTATE DEVEL	<u>OPMENT</u>		
5. Principal Office Addre	SS		
No. and Street: <u>127 PUBLIC SQUARE</u>			
	<u>re 3200</u> <u>VELAND</u> Stat	e: <u>OH</u> Zip: <u>44114</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: <u>127 PUBLIC SQUARE</u> SUITE 3200			
		e: <u>OH</u> Zip: <u>44114</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Add	Iress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
MANAGER	FC ASHTON MILL, LLC		NUMPE SUITE 1360

FC ASHTON MILL, LLC

50 PUBLIC SQUARE, SUITE 1360

MANAGER

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 22 Day of October, 2019 at 10:58:14 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 <u>KETAN PATEL</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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