Office         Di         Di         Prince         Limited Liability Company         Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each I         to file its annual report within thirty (30) days at 16-66(b&c)) is subject to a penalty fee of \$25         ANNUAL REPORT YEAR: 2019         1. ID No.       000137721         2. Exact Name of the Limited Liability Company         State: RI         Enter the six digit NAICS Code that best dest the list of codes here. More information on N	e of the Secreta ivision Of Business 148 W. River St providence RI 0290 (401) 222-304 limited liability comp after the time presch 5.00.	Services reet 4-2615 40 pany failing or refusing bed by law (R.I.G.L. 7- <u>R HILLS PARTNERS LLC</u>
President Control       President Control         Limited Liability Company Annual Report       President Control         Filing Period: September 1 - November 1       In accordance with R.I.G.L. 7-16-66(d), each for the to file its annual report within thirty (30) days at 16-66(b&c)) is subject to a penalty fee of \$25         ANNUAL REPORT YEAR: 2019       1.         1. ID No.       000137721         2. Exact Name of the Limited Liability Control       3.         State of Formation       State: RI         Enter the six digit NAICS Code that best dest the list of codes here. More information on N	148 W. River St Providence RI 0290 (401) 222-304 <i>limited liability comp</i> <i>after the time prescu</i> 5.00. <b>company</b> <u>EXETER</u> <b>ARTICLE III</b> scribes the primary	reet 4-2615 40 Dany failing or refusing ribed by law (R.I.G.L. 7- <u>R HILLS PARTNERS LLC</u>
Limited Liability Company Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each for to file its annual report within thirty (30) days at 16-66(b&c)) is subject to a penalty fee of \$25         ANNUAL REPORT YEAR: 2019         1. ID No.       000137721         2. Exact Name of the Limited Liability Company State: RI         Enter the six digit NAICS Code that best dest the list of codes here. More information on N	(401) 222-304 limited liability comp after the time presch 5.00. company <u>EXETER</u> ARTICLE III scribes the primary	40 pany failing or refusing ribed by law (R.I.G.L. 7- <u>R HILLS PARTNERS LLC</u>
Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each is         to file its annual report within thirty (30) days at         16-66(b&c)) is subject to a penalty fee of \$25         ANNUAL REPORT YEAR: 2019         1. ID No. 000137721         2. Exact Name of the Limited Liability Cold         3. State of Formation         State: RI         Enter the six digit NAICS Code that best dest         the list of codes here. More information on N	after the time prescu 5.00. Tompany <u>EXETER</u> ARTICLE III scribes the primary	tibed by law (R.I.G.L. 7-
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3. State of Formation State: <u>RI</u> Enter the six digit NAICS Code that best des the list of codes <u>here.</u> More information on <u>N</u>	ARTICLE III scribes the primary	
State: <u>RI</u> Enter the six digit NAICS Code that best des the list of codes <u>here.</u> More information on <u>N</u>	scribes the primary	business conducted by the entity. Download
Enter the six digit NAICS Code that best des the list of codes here. More information on N	scribes the primary	business conducted by the entity. Download
the list of codes here. More information on N	scribes the primary	ousiness conducted by the entity. Download
the list of codes here. More information on N		pusiness conducted by the entity. Download
531120		
<u>531120</u>		
4. Brief Description of the Character of th	e Business Which	is Actually Conducted in Rhode Island
LESSOR OF NONRESIDENTIAL REAL	<u>L ESTATE</u>	
5. Principal Office Address		
No. and Street:7 WHALEN DRIVECity or Town:LINCOLN	<u>E</u> State: <u>R</u>	I Zip: <u>02865</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Co	ompany and Name	or Title of Contact Person:
Contact Name: Contact Title: No. and Street: <u>7 WHALEN DRIVE</u>		
City or Town: <u>LINCOLN</u>	State: <u>RI</u>	Zip: <u>02865</u> Country: <u>USA</u>
7. Name and Address of Each Manager o DO NOT LIST MEMBERS	of the Limited Liab	ility Company, if Applicable.
	ual Name	Address
	e, Last, Suffix A. MELUCCI	Address, City or Town, State, Zip Code, Country
		222 EXETER ROAD

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

DAVID M. GILDEN, ESQ. 40 WESTMINSTER STREET, SUITE 1100 PROVIDENCE , RI 02903

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 2:52:16 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 THOMAS A MELUCCI

Signature of Authorized Person

Form No. 632 Revised 09/07

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