Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 Limited Liability Company	s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00	
Annual Report Filing Period: September 1 - November 1 Filing Period: September 1 - November 1 In accordance with R.I.G.L. 7-16-66(b.8), each limited liability company failing or refusing to file its annual report with hifty (30) days after the time prescribed by law (R.I.G.L. 7- 10-66(b.8c)) is subject to a penalty fee of \$25.00. ANNUAL REPORT YEAR: 2019 1. ID No. 000152039 2. Exact Name of the Limited Liability Company FRANKLIN TEMPLETON INSTITUTIONAL, LLC 3. State of Formation State: DE ARTICLE II Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 523930 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island INVESTMENT ADVISER 5. Principal Office Address No. and Street: 280 PARK AVENUE City or Town: NEW YORK State: NY Zip: 10017 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: VIRGINIA E. ROSAS Contact Title: SECRETARY No. and Street: ONE FRANKLIN PARKWARY City or Town: SAN MATEO State: ONE FRANKLIN PARKWARY Title Individual Name Address	Division Of Business Services 148 W. River Street Providence RI 02904-2615				
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 18-66(b&c)) is subject to a penalty fee of \$25.00. ANNUAL REPORT YEAR: 2019 1. ID No. 000152039 2. Exact Name of the Limited Liability Company FRANKLIN TEMPLETON INSTITUTIONAL, LLC 3. State of Formation State: Exact Name of the Limited Liability Company FRANKLIN TEMPLETON INSTITUTIONAL, LLC ARTICLE III Exact Name of the Limited Liability Company FRANKLIN TEMPLETON INSTITUTIONAL, LLC ARTICLE III Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 523930 5. Principal Office Address No. and Street: 280 PARK AVENUE City or Town: NEW YORK State: NY zip: 10017 Country: USA 6 Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: ONE FRANKLIN PARKWAY City or Town: State: CA zip: 94403 Country: USA Title Individual Name	Annual Report				
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	Title			ode, Country	

8. RESIDENT AGENT IN RHODE 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 22 Day of October, 2019 at 7:03:20 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>VIRGINIA E. ROSAS</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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