	S	tate of Rhode Island an Office of the Se				Fee: \$50.00
HOPE	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040					
	•					
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:	<u>2019</u>				
1. ID No. <u>001689673</u>						
2. Exact Name of the Limited Liability Company Milestone Employer - East Bay, 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 here. More information on NAICS can be found online.						
<u>624120</u>						
4 Brief Description	on of th	e Character of the Business	Which	is Actu	ally Conducted in Rho	ode Island
4. Dhei Descripti		e Character of the Business	WINCH			
EMPLOYEE EN	TITY H	FOR SENIORS HOUSING				
5. Principal Office	e Addre	SS				
No. and Street:	201 N	E PARK PLAZA DRIVE				
	<b>STE</b> 1					
City or Town:		COUVER	St	ate: <u>WA</u>	Zip: <u>98684</u> Cou	ntry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:						
Contact Name: PAUL DENDY Contact Title: MANAGER						
No. and Street:	201 N	E PARK PLAZA DR.				
City or Town:	<u>STE 1</u> VANC	<u>05</u> :OUVER	State	e: <u>WA</u>	Zip: <u>98684</u> Cour	ntry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS						
Title		Individual Name			Address	
		First, Middle, Last, Suffix			ress, City or Town, State, Zip Code, Country	

PAUL DENDY

MANAGER

201 NE PARK PLAZA DR, STE 105

VANCOUVER, WA 98660 USA

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

UNISEARCH, INC. 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 24 Day of October, 2019 at 6:50:59 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>PAUL DENDY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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