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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

R.I. DEPT. OF STATE Annual Report for the year: 2019 **Limited Liability Company** 2815 DEC -5 PM 12: 23

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→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

itity ID Number		2. Exact name of the Limited Liability Company				
0487382	XM Group Realty, LLC					
AICS Code	Brief description of the character of business conducted in Rhode Island					
90	Purchase, sale and leasing of real estate					
ate of Formation	╡					
incipal Office Address			City	State	Zip	
1861 Smith Street			North Providence	RI	02911	
ailing Address of Limited L	iability Compa	ny and Name or		<u> </u>		
Contact Name Leart Mezini			Contact Title Member			
Street Address 1861 Smith Street			City North Providence	State RI	^{Zip} 02911	
st ALL managers (names	and addresses	s) of the Limited L	iability Company, IF APPLICABLE	- DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
·	State	Zıp	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
	State	Zip	City	State	Zip	
· · · · · · · · · · · · · · · · · · ·		<u></u>		Check the box to	indicate an attachment	
esident Agent in Rhode Isla	and, This inforn	nation is currently o	frecord with the Department of State.	Changes require fili	ng Form 642.	
er penalty of perjury, I de ements, and that all state	eclare and aff ements conta	irm that i have e ined herein are t	xamined this report, including a true and correct.	nny accompanyin	ng schedules and	
Name of Authorized Person				Date	Date	
Lear Mezini						
ature of Authorized Perso	h	SIGN	N DOCUMENT HERE		-	
er penalty of perjury, I de aments, and that all state	clare and aff ments conta	irm that I have e ined herein are (xamined this report, including a true and correct.	ny accompanyin		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 632 - Revised: 10/2017