RI SOS Filing Number: 202034919910 Date: 2/21/2020 4:00:00 PM State of Rhode Island and Providence Plantations Department of State - Business Services Division Annual Report for the year: 20/ **Limited Liability Company** -> Filing period: September 1 - November 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1. 1. Entity ID Number 2. Exact name of the Limited Liability Company Bona Fide Properties LLC 4. Brief description of the character of business conducted in Rhode Island 531190 Rental Property 5. State of Formation 6. Principal Office Address State Wakefield RT02879 91 Chickadee LN 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title Mauager City Zip 02879 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name Manager Name Street Address Street Address City State Zip City State Zip Manager Name Manager Name Street Address Street Address City State Zip City State Zip Check the box to indicate an attachment 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

SIGN HOOLES IN

MAIL TO:

Division of Business Services

Name of Authorized Person

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

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

Date

2-19-2020