RI SOS Filing Number: 202059431880 Date: 9/25/2020 4:00:00 PM

State of Rhode Island  Department of State - Business Services Division	
Annual Report for the year:	ļ
Limited Liability Company	1
<ul> <li>→ Filing period: September 1 - November 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty. Additional \$25.00 fee if form is not filed by December 1.</li> </ul>	

Entity ID Number	2. Exact name of the Limited Liability Company						
000157805	GCC, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531390	Real Estate Holding Company						
5. State of Formation	1						
RI							
6. Principal Office Address			City	State	Zip		
1445 Wampanoag Trail, Suite 203			East Providence	RI	02917		
7. Mailing Address of Limited Lia	ability Compan	y and Name or	Title of Contact Person		·		
Contact Name			Contact Title				
Patrick T. Conley		<del> </del>	Managing Member				
Street Address 1445 Wampanoag Trail, Suite 203			City East Providence	State RI	<sup>Zip</sup> 02915		
8. List ALL managers (names a	nd addresses)	of the Limited L	iability Company, IF APPLICABLE	- DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zıp	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zip		
	<u> </u>	<u> </u>	C	heck the box to	indicate an attachment		
9. The Resident Agent information	on currently of	record with the	RI Department of State is accurate	. Changes requir	e filing Form 642.		
Under penalty of perjury, I dec statements, and that all states			xamined this report, including an rue and correct.	ny accompanyin	g schedules and		
Name of Authorized Person				Date	Date		
Patrick T. Conley			Septemb	September 21, 2020			
Signature of Authorized Person	Van	lef					

MAIL TO:

**Division of Business Services** 

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

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

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