RI SOS Filing Number: 202066353830 Date: 10/15/2020 4:00:00 PM



OCT 1 5 2020; OVIP

Annual Report for the year: 2020 Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Panalty: Additional \$25.00 fee if form is not filed by December 1.

| 1. Entity ID Number | 2 Every name of the Limited LinkSite Company | | | | |
|--|--|-----|----------------|-----------------|-----------|
| 157603 | 2. Exact name of the Limited Liability Company | | | | |
| | 106 Nate Whipple Highway, LLC | | | | |
| 3. NAICS Code | Brief description of the character of business conducted in Rhode Island | | | | |
| 531390 | To engage in real estate holdings. | | | | |
| 5. State of Formation | [| | | | |
| Rhode Island | | | | | |
| 6. Principal Office Address | | | City | State | Ζiρ |
| 106 Nate Whipple Highway | | | Cumberland | RI | 02864 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Scott Wilson, M.D. | ١. | | Contact Title | | |
| Street Address 8 Christopher Dr. | | | City Lincoln | State RI | Zip 02865 |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS | | | | | |
| Manager Name | | | Manager Name | | |
| Sweet Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Manager Name | | | Manager Name | | |
| Straet Address | | | Street Address | | |
| City | State | Zıp | City | State | Zrp |
| Check the box to indicate an attachment | | | | | |
| 9. The Resident Agent information currently of record with the RI Department of State is accurate. 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. | | | | | |
| Name of Authorized Person | | | | Date | - |
| Scott Wilson, M.D. | | | | October 9, 2020 | |
| Signalure of Authorized Person | | | | | |
| Jan-1 MJ8r-MD | | | | | |

MAIL TO:

Division of Business Services

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

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