



State of Rhode Island

Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV2020 OCT 16 P 4:25
S13...Annual Report for the year: 2020

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 160174		2. Exact name of the Limited Liability Company 800 Hope Street Associates, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Real estate management and leasing			
5. State of Formation RI					
6. Principal Office Address 143 Smithfield Road		City North Providence		State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Azarig Kooloian Jr.			Contact Title Manager		
Street Address 6 Palou Drive		City North Providence		State RI	Zip 02904
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Azarig Kooloian Jr.			Manager Name		
Street Address 6 Palou Drive			Street Address		
City North Providence	State RI	Zip 02904	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 Azarig Kooloian Jr.				Date 10/16/20	
Signature of Authorized Person 					

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

OCT 16 2020

BY CLC #1039