	State of Rhode Island Department of State - Business Services Di	ivision
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FILED

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	2. Exact nam	2. Exact name of the Limited Liability Company					
1664655	BI Harborvie	ew Partners I, LLC	3		_		
3. NAICS Code	4. Brief desc	ription of the char	racter of business conducted i	in Rhode Island			
531311 Real Estate		Estate Management/Holding LLC.					
5. State of Formation							
CT							
6. Principal Office Address			City	State	Zip		
1471 Pleasant Valley Road			Manchester	ст	06042		
7. Mailing Address of Limi	ited Liability Compan	y and Name or Tri					
Contact Name Richard P. F	Hayes, Jr.		Contact Title Principal				
Stree! Address 1471 Pleasa	ant Valley Road		City Manchester	State CT	^{Zip} 06042		
		of the Limited Lia	ability Company, IF APPLICAE	BLE - DO NOT LIST !	MEMBERS		
Manager Name Richard P.	Hayes, Jr.		Manager Name	Manager Name			
Street Address 1471 Pleasant Valley Road			Street Address				
City Manchester	State CT	^{2ip} 06042	City	Støte	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				Check the box to	indicate an attachment		
9. The Resident Agent inf	formation currently of	record with the R	I Department of State is accu	urate. Changes requir	re filing Form 642.		
Under penalty of perjury statements, and that all			amined this report, including ue and correct.	ig any accompanyln	g schedules and		
Name of Authorized Person	.on			Date			
Richard P. Hayes, Jr.)	-		X10-	20 - 2020		
Signature of Authorized P	erson 1/	7					

MAIL TO:

Division of Business Services

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

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