	State of Rho Office of the Sec		Fee: \$50.00	
	Division Of Busi 148 W. Rive Providence PL	er Street		
HOPE	Providence RI ( (401) 222			
Limited Liability Com Annual Report Filing Period: September 1 -				
	7-16-66(d), each limited liability on thirty (30) days after the time propenalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020				
<b>1. ID No.</b> <u>001679803</u>				
2. Exact Name of the Limited Liability Company Hope Artiste Residential Master Tenant LLC				
3. State of Formation				
State: <u>RI</u>				
	ARTICLE			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.				
<u>531110</u>				
4. Brief Description of the	e Character of the Business W	hich is Actually Conducted in	n Rhode Island	
REAL ESTATE				
5. Principal Office Addres	SS SS			
No. and Street:1005 MAIN STREET #1220City or Town:PAWTUCKETState: RIZip: 02860Country: USA				
6. Mailing Address of Lin	6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:   No. and Street: 1005 MAIN STREET, SUITE 1220   City or Town: PAWTUCKET   State: RI Zip:   02860 Country:   USA				
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State		
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER				

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

VCORP SERVICES, LLC 222 JEFFERSON BOULEVARD WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 30 Day of October, 2020 at 10:58:42 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By LANCE JAY ROBBINS

Signature of Authorized Person

Form No. 632 Revised 09/07

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