	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St	reet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.		-
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001686514</u>	<u>1</u>		
2. Exact Name of the Lin	mited Liability Company Three Po	int Ventures, LLC	
3. State of Formation			
State: <u>MA</u>			
	ARTICLE III		
0	Code that best describes the primary	ousiness conducted by	the entity. Download
The list of Codes <u>Here.</u> More	e information on <u>NAICS</u> can be found	online.	,
<u>531110</u>	e information on <u>NAICS</u> can be found	online.	
<u>531110</u>	e information on <u>NAICS</u> can be found e Character of the Business Which		-
<u>531110</u> 4. Brief Description of the		is Actually Conducte	-
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531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 Page	e Character of the Business Which	is Actually Conducte	-
531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 P. City or Town: FRA	e Character of the Business Which NTIAL BUILDINGS AND DWEL ss ALOMINO DRIVE	is Actually Conducte	ed in Rhode Island Country: <u>USA</u>
531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 P/ City or Town: FRA 6. Mailing Address of Line No. and Street: 62 P/ Contact Name: NEETU T No. and Street: 62 P/	e Character of the Business Which NTIAL BUILDINGS AND DWEL ss ALOMINO DRIVE NKLIN State: mited Liability Company and Name THAKUR Contact Title: ALOMINO DRIVE	is Actually Conducte LINGS MA Zip: 02038 or Title of Contact P	ed in Rhode Island Country: <u>USA</u>
531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 P. City or Town: FRA 6. Mailing Address of Line No. and Street: NEETU T No. and Street: 62 P.	e Character of the Business Which NTIAL BUILDINGS AND DWEL ss ALOMINO DRIVE NKLIN State: mited Liability Company and Name	is Actually Conducte LINGS MA Zip: <u>02038</u> or Title of Contact P	ed in Rhode Island Country: <u>USA</u>
531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 P./ City or Town: FRA 6. Mailing Address of Line No. and Street: 62 P./ Contact Name: NEETU T No. and Street: 62 P./ City or Town: FRA	e Character of the Business Which NTIAL BUILDINGS AND DWEL ss ALOMINO DRIVE NKLIN State: mited Liability Company and Name THAKUR Contact Title: ALOMINO DRIVE NKLIN State: I Each Manager of the Limited Liab	is Actually Conducte LINGS MA Zip: 02038 or Title of Contact P MA Zip: 02038	ed in Rhode Island Country: <u>USA</u> Person: Country: <u>USA</u>
531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 P./ City or Town: FRA 6. Mailing Address of Line No. and Street: 62 P./ Contact Name: NEETU T No. and Street: 62 P./ City or Town: FRA 7. Name and Address of Line	e Character of the Business Which NTIAL BUILDINGS AND DWEL ss ALOMINO DRIVE NKLIN State: mited Liability Company and Name THAKUR Contact Title: ALOMINO DRIVE NKLIN State: [Each Manager of the Limited Liab RS Individual Name	is Actually Conducte LINGS MA Zip: 02038 or Title of Contact P MA Zip: 02038 ility Company, if App Add	ed in Rhode Island Country: <u>USA</u> erson: Country: <u>USA</u> blicable.
531110 4. Brief Description of the LESSORS OF RESIDEN 5. Principal Office Address No. and Street: 62 P./ City or Town: FRA 6. Mailing Address of Line No. and Street: 62 P./ Contact Name: NEETU T No. and Street: 62 P./ City or Town: FRA 7. Name and Address of DO NOT LIST MEMBER	e Character of the Business Which NTIAL BUILDINGS AND DWEL ss ALOMINO DRIVE NKLIN State: mited Liability Company and Name THAKUR Contact Title: ALOMINO DRIVE NKLIN State: Each Manager of the Limited Liab RS	is Actually Conducted LINGS MA Zip: 02038 or Title of Contact P MA Zip: 02038 ility Company, if App Address, City or Town, 3	ed in Rhode Island Country: <u>USA</u> erson: Country: <u>USA</u> blicable.

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

SEAN D. ELLIOTT, ESQ. <u>1 GROVE AVENUE</u> EAST PROVIDENCE , <u>RI</u> <u>02914</u>

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 10:58:51 PM 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 <u>NEETU THAKUR</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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