RI SOS Filing Number: 202072021190 Date: 10/30/2020 4:00:00 PM

(FF)	State of Rhode Island Department of State - Business Services Division
	Department of State - Business Services Division

Annual Report for the year: 2020

Limited Liability Company

→ Filing period: Septem → Filing Fee: \$50.00	• •	ber 1		DU 1 30 Evel	USE ONLY	
→ Penalty: Additional \$2	5.00 fee if form	is not filed by Dec	cember 1. B	Y		
Entity ID Number	2 Exact na	Liability Company				
000796023		ACRE, LLC	. ,		• -	
3 NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island				
531110	Ownership	Ownership and operation of residential real estate				
5 State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
900 Harvard Place			Charlotte	NC	28207	
7. Mailing Address of Limite		any and Name or 1	Title of Contact Person	<u></u>		
Contact Name D. Bradford B	arrett		Contact Title Member	Contact Title Member		
Street Address 900 Harvard Place			City Charlotte	State NC	Zip 28207	
8. List ALL managers (nam	es and addresse	s) of the Limited Li	ability Company, IF APPLIC	ABLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address		<u> </u>	Street Address			
City	State	Zip	City	State	Zip	
Manager Name	<u> </u>		Manager Name			
Street Address		 	Street Address			
City	State	Zıp	City	State	Zıp	
	 !			Check the box to it	 ndicate an attachment	
9. The Resident Agent inform	mation currently	of record with the f	RI Department of State is acc	curate. Changes require	e filing Form 642.	
Under penalty of perjury, a statements, and that all st	l declare and aff latements conta	firm that I have on ined herein are tr	remined this report, includ rue and correct.	ing any accompanyin	g schedules and	
Name of Authorized Person		Date				
D. Bradford Barrett			10/5/	2020		
Signature of Authorized Per D. Brack	In Ba	wett				

MAIL TO:

Division of Business Services

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

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

STAMP

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