State of Rhode Island Office of the Secretary of State		Fee: \$50.00	
Division Of Business Services 148 W. River Street			
Providence RI 02904-2615			
(401) 222-3040			
Limited Liability Company Annual Report			
Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-			
16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020			
1. ID No. 000081381			
2. Exact Name of the Limited Liability Company <u>ADS INVESTMENTS, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
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>531390</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
PURCHASE, LEASE, SELL AND MANAGE REAL ESTATE			
5. Principal Office Address			
No. and Street: 2461 EAST MAIN ROAD			
City or Town: PORTSMOUTH State: <u>RI</u> Zip: <u>02871</u> Country: <u>USA</u>			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: DUANE K POLSELLI Contact Title: No. and Street: 2461 EAST MAIN ROAD			
	TSMOUTH State	e: <u>RI</u> Zip: <u>02871</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Add	ress
	First, Middle, Last, Suffix	Address, City or Town, S	State, Zip Code, Country
MANAGER	DUANE K POLSELLI	2461 EAST MAIN ROAD PORTSMOUTH. RI 02871 USA	

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

DUANE K. POLSELLI 2461 EAST MAIN ROAD PORTSMOUTH , RI 02871

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

Signed this 29 Day of November, 2020 at 3:51:00 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 **DUANE K POLSELLI**

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved