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(FF)	State of Rhode Island and Providence Plantations Department of State - Business Services Division
	Department of State - Dusiness Services Division

Annual Report for the year: 2016

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.

		not med by Deet			A DIE
1. Entity ID Number 000150026		2. Exact name of the Limited Liability Company Blue Wave Real Estate LLC			
3. NAICS Code 531120		ription of the char nd Real Estate B			
5. State of Formation MA					
6. Principal Office Address	· · · · · · · · · · · · · · · · · · ·		City	State	Zip
72 Powers Street			Needham	MA	02492
7. Mailing Address of Limite	d Liability Compan	y and Name or Ti		_	
Contact Name Yvonne D. Bl	ackman		Contact Title Manager		
Street Address 72 Powers S	treet		City Needham	State MA	Zip 02492
8. List ALL managers (nam	es and addresses)	of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS
Manager Name Yvonne D. B	fackman		Manager Name		
Street Address 72 Powers St	treet	<u> </u>	Street Address		
City Needham	State MA	Zip 02492	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zìp	City	State	Zip
	- <u>-</u> -		- ¹	Check the box to i	ndicate an attachment
9. Resident Agent in Rhode	Island. This nforma	ition is currently of re	ecord with the Department of St	ate. Changes require filir	ig Form 642.
Under penalty of perjury, statements, and that all s			amined this report, including and correct.	ng any accompanyin	g schedules and
Name of Authorized Person	l		Date		
Yvonne D. Blackman, Mar	nager			2-21	-2071
Signature of Authorized Per	Caelena	Strict	MERT N. F. I		
					•

MAIL TO:

Division of Business Services

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

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

JUN 1 1 2021

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FORM 632 - Revised: 10/2017