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.

1. Entity ID Number	2. Exact name of the Limited Liability Company				
000566343	85 Fairmount, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531311	Real Estate Holding Company				
5. State of Formation					
Rhode Island					
6. Principal Office Address			City	State	Zip
230 South Main Street, #9			Providence	RI	02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Donald Gordon			Contact Title		
Street Address 230 South Main Street #9			City Providence	State RI	^{Zip} 02903
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Ζip	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attachment					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Date					
Donald Gordon Donald Gordon Muse Sind Sind Sind Sind Sind Sind Sind Sind					
Signature of Authorized Person					

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

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FORM 632 - Revised: 08/2020