	State of Rhode Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street Providence RI 02904-2615			
(401) 222-3040			
NOPE .			
Limited Liability Company Annual Report			
Filing Period: September 1	- November 1		
In accordance with RIGI	7-16-66(d) each limited liability com	nany failing or refusing	
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:	<u>2021</u>		
1. ID No. <u>000295015</u>			
2. Exact Name of the Limited Liability Company SHERATON LICENSE OPERATING			
COMPANY, LLC			
3. State of Formation			
State: <u>DE</u>			
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.			
721110			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
OPERATOR OF SHERATON BRAND HOTELS.			
5. Principal Office Addre	SS		
No. and Street: 7700	E ARAPAHOE RD		
		<u>CO</u> Zip: <u>80112</u>	Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
b. Mailing Address of Lir	nited Liability Company and Name	e or little of Contact Pe	rson:
Contact Name: Contact Title: No. and Street: <u>7700 E ARAPAHOE RD</u>			
		: <u>CO</u> Zip: <u>80112</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	Addr	ess
	First, Middle, Last, Suffix	Address, City or Town, St	

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

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <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 6 Day of October, 2021 at 2:22:31 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>KELLY LETTMANN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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