

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 128983	2 Exact nar Alice Vic	2 Exact name of the limited liability company Alice Viola Properties, L.L.C.					
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island Real estate rental.					
RI							
6. Principal office address 915 Smith Street			City Providence	State RI	Zip 02908		
6. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT F	PERSON:			
Contact Name David Carbone			Contact Title Member				
Street Address 915 Smith Street				State RI	Zip 02908		
7. LIST <u>ALL</u> MANAGERS ("X" BOX FOR ATTACH		PRESSES) OF THE	LIMITED LIABILITY COMPANY, II	FAPPLICABLE - DO	NOT LIST MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	1			
Street Address			Street Address				
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT IN R	The second secon						
This information is curren	tly of record in th	e Office of the Secr	etary of State. Changes require	filing Form 642.			
- 54E N.V		•					

FILED

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File Date	BY _ ALM	Under penalty of perjury, I declare and affirm the this report, including any accompanying schedand that all statements contained herein are true.	lules and statements,	
Check No		2 Jal Cerlas	3.3-15	
Bv:		Signature of Authorized Person	Date	
		David Carbone, Member		
FOR SECRETARY OF STATE USE ONLY		Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012