State of Rhode Island and Providence Plantations Department of State - Business 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. 	

1. Entity ID Number	2. Exact name of the Limited Liability Company					
1336404	895 Smithfield Avenue, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 - Real Estate and Rental and	Invest and hold real estate for resale.					
5. State of Formation	1					
Rhode Island						
6. Principal Office Address	City State Zip				Zip	
300 Front Street			Lincoln	RI	02865	
7. Mailing Address of Limited Lia		and Name or Tit		•		
Contact Name Bradley J. Diegel			Contact Title Manager			
Street Address 300 Front Street			City Lincoln	State RI	Zip 02865	
8. List ALL managers (names ar		of the Limited Lia	bility Company, IF APPLIC	ABLE - DO NOT L	IST MEMBERS	
Manager Name Bradley J. Diegel			Manager Name			
Street Address 300 Front Street			Street Address			
^{City} Lincoln	State RI	Zip 02865	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box	x to indicate an attachment	
9. Resident Agent in Rhode Islan	d. This information	on is currently of re	cord with the Department of S	State. Changes require	e filing Form 642.	
Under penalty of perjury, I decistatements, and that all statem				ing any accompar	nying schedules and	
Name of Authorized Person				Date		
Bradley J. Diegel, Manager				9/	13/2016	

Manager SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

Signature of Authorized Person

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

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

