°	State of Rhode Island and Pr Office of the Secret	
	Division Of Busines	s Services
	148 W. River S	
	Providence RI 029	
HOPE	(401) 222-30	940
imited Liability Com	pany	
Annual Report Filing Period: September 1	November 1	
	. 7-16-66(d), each limited liability con in thirty (30) days after the time pres	
6-66(b&c)) is subject to a		
ANNUAL REPORT YEAR:	2019	
1. ID No. <u>00102220</u>	5	
2. Exact Name of the Li	mited Liability Company <u>75 EAS</u>	T ST, LLC
3. State of Formation		
State: <u>DE</u>		
	ARTICLE III	
-		v business conducted by the entity. Download
the list of codes <u>nere.</u> Mor	e information on <u>NAICS</u> can be found	Johime.
<u>531110</u>		
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in Rhode Island
REAL ESTATE INVES	TMENT	
5. Principal Office Addre	SS	
No. and Street: 11828	LA GRANGE AVENUE	
		State: <u>CA</u> Zip: <u>90025</u> Country: <u>USA</u>
• • • • • • • • • • • • • • • • • • •		
6. Mailing Address of Li	mited Liability Company and Nam	e or litle of Contact Person:
Contact Name: Contact		
	LA GRANGE AVENUE	tata: CA zin: 00025 Country: USA
City or Town: LOS A	<u>NGELES</u> S	itate: <u>CA</u> Zip: <u>90025</u> Country: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	^F Each Manager of the Limited Lia RS	bility Company, if Applicable.
	In all of the LA	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	HAWKINS WAY CAPITAL, LLC	11828 LA GRANGE AVENUE
		LOS ANGELES, CA 90025 USA

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

COGENCY GLOBAL INC. 222 JEFFERSON BOULEVARD WARWICK, RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 2 Day of November, 2019 at 4:30:07 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 JEMMA SHAULOV

Signature of Authorized Person

Form No. 632 Revised 09/07

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