



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$500.00

Secretary of the Commonwealth, Corporations Division
 One Ashburton Place, 17th floor
 Boston, MA 02108-1512
 Telephone: (617) 727-9640

Annual Report

(General Laws, Chapter)

Identification Number: 001070035

Annual Report Filing Year: 2016

1.a. Exact name of the limited liability company: MACRAE ASSET CONSULTING, LLC

1.b. The exact name of the limited liability company as amended, is: MACRAE ASSET CONSULTING, LLC

2a. Location of its principal office:

No. and Street: 16 ADAMS ROAD

City or Town: MARBLEHEAD

State: MA

Zip: 01945

Country: USA

2b. Street address of the office in the Commonwealth at which the records will be maintained:

No. and Street: 16 ADAMS ROAD

City or Town: MARBLEHEAD

State: MA

Zip: 01945

Country: USA

3. The general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:

THE GENERAL CHARACTER OF THE BUSINESS OF THE LLC SHALL BE THE ACQUISITION AND MANAGEMENT OF PROPERTY LOCATED IN THE COMMONWEALTH OF MASSACHUSETTS AND ANY BUSINESS RELATED THERETO OR USEFUL IN CONNECTION THEREWITH, AND ANY OTHER LAWFUL BUSINESS PURPOSE OR ACTIVITY PERMITTED BY THE ACT.

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: MARK MACRAE

No. and Street: 16 ADAMS ROAD

City or Town: MARBLEHEAD

State: MA

Zip: 01945

Country: USA

6. The name and business address of each manager, if any:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
MANAGER	MARK MACRAE	16 ADAMS ROAD MARBLEHEAD, MA 01945 USA

7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
SOC SIGNATORY	MARK MACRAE	16 ADAMS ROAD MARBLEHEAD, MA 01945 USA

8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	MARK MACRAE	16 ADAMS ROAD MARBLEHEAD, MA 01945 USA

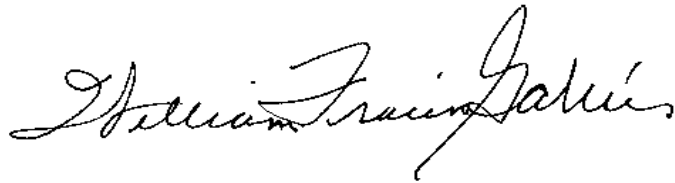
9. Additional matters:

SIGNED UNDER THE PENALTIES OF PERJURY, this 13 Day of January, 2016,
MARK MACRAE , Signature of Authorized Signatory.

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

January 13, 2016 05:30 PM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is written in a cursive, flowing style with a large initial 'W' and 'G'.

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth