| Annual Report Filing Poriod: February 1 - May 1 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(kbc)) is subject to a penalty fee of \$25:00. ANNUAL REPORT YEAR: 2023 1. ID No. 001749641 2. Exact Name of the Limited Liability Company 14 JOHNSON, LLC 3. State of Formation State: RI File ARTICLE III 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. 531110 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island RENTAL PROPERTY 5. Principal Office Address No. and Street: 23 COMMERCIAL ST City or Town: NANTUCKET State: MA Zip: 02554 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: ALINA APTEKER Contact Title: MANAGER No. and Street: 23 COMMERCIAL ST City or Town: NANTUCKET State: MA Zip: 02554 Country: USA 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11 | | |
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| 148 W. River Street Providence RI 02904-2615 (401) 222-3040 Similar Company Annual Report Pling Period: February 1 - May 1 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 presented by law (R.I.G.L. 7-16-66(k6c)) is subject to a penalty fee of \$25.00 ANNUAL REPORT YEAR: 2023 In D. 0. 001749641 2. Exact Name of the Limited Liability Company 14 JOHNSON, LLC 3. State of Formation State: RI ARTICLE II 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. 531110 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode sland RENTAL PROPERTY 5. Principal Office Address No. and Street: 23 COMMERCIAL ST City or Town: State: MA Zip: 02554 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: ALINA APTEKER Contact Title: MANTUCKET State: MA Zip: 02554 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Con | | Fee: \$50.00 |
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8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 28 Day of February, 2023 at 6:22:50 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>ALINA APTEKER</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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