



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

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**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

[?](#)  
Help with this form

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(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2013

1. ID No. 000158542

2. Exact Name of the Limited Liability Company Commons Cottage, LLC.

3. State of Formation

State: RI

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

INVESTMENT/RENTAL PROPERTIES

5. Principal Office Address

No. and Street: 7 SOUTH OF COMMONS ROAD

City or Town: LITTLE COMPTON

State: RI

Zip: 02837

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Josephine Richmond

Contact Title:

No. and Street: 7 SOUTH OF COMMONS ROAD

City or Town: LITTLE COMPTON

State: RI

Zip: 02837

Country: USA

**FILED**

SEP 11 2013

BY 313

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

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

THOMAS ARKINS 7B SOUTH COMMONS ROAD LITTLE COMPTON , RI 02837-

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

**Filer's Contact Information**

*(Enter a contact name, mailing address and email.)*

Contact Name: Josephine Richmond  
 Business Name: Commons Cottage, LLC  
 No. and Street: 60 Treaty Rock Rd    
 City or Town: Little Compton State: RI Zip: 02837 Country: USA  
 Contact Phone: 401-641-4350 ext: \_\_\_\_\_  
 Contact Email: josiearkins@gmail.com

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

**Signed this 5 Day of September, 2013 at 3:11:08 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   
Signature of Authorized Person

**FILED**  
SEP 11 2013  
BY ID 158542

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-16. You hereby agree that any legal issues or causes of action arising from the submission of this

Accept  Decline

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