RI SOS Filing Number: 201750736070 Date: 9/29/2017 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Annual Report for the year: 2017 Limited Liability Company

- => Filing period: September 1 November 1
- → Filling Fee \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1 Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company MIANSTEPH II, LLC				
1663743						
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island Develop, buy, sell, lease residential and/or commercial real estate				
531110						
5. State of Formation	——	•	,	•		
Rhode Island						
6. Principal Office Address			City	State	7ip	
24 Lantern Lane			Cranston	RI	02921	
7. Mailing Address of Limite	d Liability Compa	ny and Name (or Title of Contact Person			
Contact Name Stephanie Soscia			Contact Title Member			
Street Address 24 Lantern Lane			City Cranston	State RI	Zip 02921	
8. List ALL managers (name	es and addresses) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	— MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City Cranston	State RI	Zip	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	!			Check the box to in		
 Resident Agent in Rhode Is 	sland. This informa	tion is currently (of record with the Department of Sta	ate. Changes require filing	u Form 542	
Under penalty of perjury, I c statements, and that all sta	declare and affiri	in that I have i	examined this tenort including	ng any accompanying	g schedules and	
Name of Authorized Person		su nerem are.	the and correct.	Date		
Stephanie Soscia				x 9-21-		
Signature of Approvided Perso	on				-· ' / · · · · · · · · · · · · · · · · · ·	
1 Stonar	rû xanê	SIGN [DOCUMENT HERE			
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MAIL TO:

Division of Business Services

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

Phone (401) 222-3040

Website, www.scs.ingov

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