RI SOS Filing Number: 201750945490 Date: 10/4/2017 4:00:00 PM



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Annual Report for the year:

2017

FOR RECEPTARY OF STATE A SE OLA

**Limited Liability Company** 

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

<u> </u>	T	4 41 1			
1. Entity ID Number	2. Exact name of the Limited Liability Company				
1665772	Star Property Care, LLC				
3. NAICS Code 561210	4. Brief description of the character of business conducted in Rhode Island				
	Property Maintenance				
5. State of Formation	1				
Rhode Island					
6. Principal Office Address	i		City	State	Zip
214 Marjoram Drive			Cranston	RI	02921
7 Mailing Address of Limited Lie	hildu Camaaa	u and Name as Til	In of Control Documen		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Albine Gjergji			Contact Title LLC Member		
Street Address 214 Marjoram Drive			City Cranston	State RI	<sup>Zip</sup> 02921
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
	1.			Check the box to in	ndicate an attachment
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
Under penalty of perjury, I dec statements, and that all staten				ing any accompanying	schedules and
Name of Authorized Person Date 1					
Albine Gjergji				9/15	2017
Signature/of Agtherized Person					
X Muline Sign DOCUMENT HERE					

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED** 

OCT 04 2017