

Annual Report for the year: 2017
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.

	1					
1. Entity ID Number 1331752	2 Exact name of the Limited Liability Company Slip 139, LLC					
3. NAICS Code	4 Brief description of the character of business conducted in Rhode Island					
531110	To engage in the business of holding and managing real estate and all other lawfully					
5. State of Formation RI	related purposes					
6 Principal Office Address			City	State	Zıp	
139 Spartina Cove Way			South Kingstown	RI	02879	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Title				
Contact Name Gina Catalano			Contact Title Member			
Street Address 139 Spartina Cove Way			City South Kingstown	State RI	^{7ip} 02879	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Gind Catalano			Manager Name			
Street Address 139 Sparting (ac uly			Street Address			
City South Kinggion	State	752879	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Check the box to indicate an atta						
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				y accompanyin	g schedules and	
Name of Authorized Person				Date		
Gina Catalano				9.21.2017		
Signature of Authorized Person						

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 1 3 2017

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