

State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

**STAMP** 

FON STORFTATY OF STATE USE DNUY

Annual Report for the year: 2018
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. Entity ID Number 133069	2. Exact name of the Limited Liability Company  M. Bestwick Associates, LLC					
3. NAICS Code 531390	Brief description of the character of business conducted in Rhode Island     Real Estate					
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
4019 Quaker Lane			North Kingstown	RI	02852	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name MICHAEL S. BESTWICK			Contact Title Member			
Street Address 4019 Quaker Lane			City North Kingstown	State RI	Zip 02852	
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	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate 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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
Name of Authorized Person				Date	9 li /18	
Signature of Authorized Person SIGN DOCUMENT HERE						
VIMENTO						

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 SEP 1 0 2018