

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.

FILED,							
	OCT 2 3 2018						
BY_	018)						

1. Entity ID Number 1672054	2. Exact name of the Limited Liability Company 574 Main, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531110	Real Estate Holding						
5. State of Formation							
RI (
6. Principal Office Address			City	State	Zip		
3875 30th Avenue SE			Naples	FL	34117		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Kim Ellin			Contact Title Member				
Street Address 3875 30th Avenue SE			City Naples	State FL	^{Zip} 34117		
8. List ALL managers (names ar	nd addresses) o	the Limited Liabi		CABLE - DO NOT LIST ME	MBERS		
Manager Name None			Manager Name None				
StreetAddress			Street Address				
City	State	Zip	City	State	Zip		
Manager Name None		•	Manager Name None				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachme							
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							
Kim Ellin /0/17/18							
Signature of Authorized Person 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