RI SOS Filing Number: 201881715920 Date: 11/26/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

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	
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BY 132 10	

1. Entity ID Number	2. Exact name of the Limited Liability Company 2849 Mendon Kealty LLC						
3. NAICS Code  531190  5. State of Formation  R. I.	4. Brief description of the character of business conducted in Rhode Island Real estate						
6. Principal Office Address 2849 Mendon F	W .		Cumberland	State	02864		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Andrew Puccetti			Contact Title DWNEr				
Street Address 2849   Mendon &	n Rd.		City Cumberland	State RI	Zip 02864		
8. List ALL managers (names ar	nd addresses) of	the Limited Liabil	ity Company, IF APPLICABLE - E	O NOT LIST ME	MBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
· ·		<u> </u>	Che	eck the box to ind	icate 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 Andrew Ruccetti				Date 11-21-2018			
Signature of Authorized Person  WHISIGN 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