RI SOS Filing Number: 201988451460 Date: 3/11/2019 4:11:00 PM



State of Rhode Island and Providence Plantations

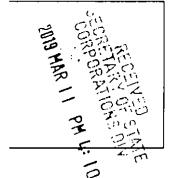
Department of State - Business Services Division

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.



					<u> </u>	
1. Entity ID Number 163133	1	2. Exact name of the Limited Liability Company LaMarra L.L.C.				
3. NAICS Code 531110	1	Brief description of the character of business conducted in Rhode Island Residential Rental Property				
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
19 Henry St Apt 1			East Providence	RI	02914	
7. Mailing Address of Limited 1	Liability Compa	any and Name or		.	•	
Contact Name Pasquale LaMarra, Jr.			Contact Title Partner	Contact Title Partner		
Street Address 2 Pine Ave			City Fairhaven	State RI	^{Zip} 02719	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
<u> </u>	<u> </u>		<u></u>	Check the box to	indicate an attachment	
9. Resident Agent in Rhode Is	land. This inform	nation is currently	of record with the Department of Sta	te. Changes require fili	ng Form 642.	
Under penalty of perjury, I d statements, and that all stat			examined this report, includin true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Pasquale LaMarra, Jr.				3/6/19		
Signature of Authorized Perse	~ ~~	SIG	N DOCUMENT HERE	•		
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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 MAR 1 1 2019 KL YCBQ6 4:11