

Annual Report for the year:

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.

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BY______\S&\C

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1. Entity ID Number 001665913	2. Exact name of the Limited Liability Company						
	LM DEVELOPMENT COMPANY, LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
53	Real estate purchase and development.						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zıp		
101 Corliss Street			Providence	RI	02904		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Guido R. Salvadore, Esq.		Contact Title Registered Agent					
Street Address 10 Weybosset Street, Suite 303		City Providence	State RI	^{Zip} 02903			
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager N'	Managarmo						
Street Addre			Street Addres:				
City _	l com	7in	City	Ki	r กวยแส 		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
		<u> </u>		Check the box to in	dicate 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							
John C. Santoro, Manager							
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