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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019
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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2. Exact name of the Limited Liability Company RP Providence, LLC						
Brief description of the character of business conducted in Rhode Island						
Any and all lawful business, including real estate investment.						
1						
		City	State	Zip		
ir Avenue		Cranston	RI	02920		
ability Compa	ny and Name or	Title of Contact Person				
caccianti		Contact Title	Contact Title			
treet Address 1140 Reservoir Avenue		City Cranston	State RI	^{Zip} 02920		
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			
State	Zip	City	State	Zip		
Manager Name		Manager Name	Manager Name			
Street Address		Street Address	Street Address			
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						
Elizabeth A Proceccianti 9-9-19						
Signature of Authorized Person SIGN DOCUMENT HERE						
	4. Brief des Any and a ability Compa caccianti avenue and addresses State	4. Brief description of the cl Any and all lawfui businesses billity Company and Name or caccianti Evenue and addresses) of the Limited I State Zip State Zip Id. This information is currently or lare and affirm that I have enents contained herein are to the lare to the lare and affirm that I have enents contained herein are the lare and affirm that I have enents contained herein are the lare and affirm that I have enents contained herein are the lare and affirm that I have enents contained herein and a lare and a lare and a	Any and all lawful business, including real estate investigation of the character of business conducted Any and all lawful business, including real estate investigation and all lawful business, including real estate investigation and all lawful business, including real estate investigation and including real estate investiga	4. Brief description of the character of business conducted in Rhode Island Any and all lawfui business, including real estate investment. City Cranston Contact Title Contact Title Contact Title Conduct Company and Name or Title of Contact Person Caccianti Contact Title Contact Title Conduct Title Conduct Title State RI Manager Name Street Address State State Zip City State Manager Name Street Address State Zip City State Check the box to ind. This information is currently of record with the Department of State. Changes require filinglare and affirm that I have examined this report, including any accompanying tents contained herein are true and correct. Date Q-9-		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov