RI SOS Filing Number: 201919833130 Date: 9/13/2019 4:00:00 PM

State of Rhode Island and Providence Plantations

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nnual Report for		9				
mited Liability Co	• •				• •	
→ Filing period. Septe → Filing Factors		per 1				
→ Filing Fee: \$50.00 → Penalty: Additional		s not filed by D	ecember 1	_		
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1. Entity ID Number	ntity ID Number 2. Exact name of the Limited Liability Company					
000148079	8079 Warren Holdings, LLC					
B. NAICS Code	4. Brief de:	scription of the c	haracter of business conducted	d in Rhode Island		
1440 M	purchase	and hold real e	state			
5. State of Formation						
Rhode Island						
6. Principal Office Addres			City	State	Zip	
43 B Memorial Blvd 2nd Floor			Newport	RI	02840	
7. Mailing Address of Lim		iny and Name o	r Title of Contact Person Contact Title			
Contact Name Joseph H. Olaynack III			Confact Title			
Street Address 43 B Memorial Blvd			City Newport	State RI	Zip 02840	
B. List ALL managers (na	ames and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
			Ollectridatess			
City	State	Zıp	City	State	Zıp	
Manager Name	L	<u> </u>	Manager Name		. <u></u> I.	
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Resident Agent in Roo	do leland. The inform	nature is surrently	of record with the Department of S		indicate an attachmer	
			examined this report, includi		_	
statements, and that all	statements conta	ined herein are	true and correct.	ng any accompanyn	ig schedules and	
Name of Authorized Person				Date		
Karen K. Corcoran				9/8/19		
Signature of Authorized F	Person			14/1/		
1/1/00	d) / m /	SIGN	DOCUMENT HERE HO			
/// / \ ma						

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**

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COMM 6 2 - Revised: 08/2016