

State of Rhode Island and Providence Plantations

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

**STAMP** 

Annual Report for the year: 2019

HOP SECRETALITY OF STATE THE ONLY

**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.

1 Entity ID Number		2. Exact name of the Limited Liability Company				
1678147	11 BR	11 BROADCOMMON, LLC				
3. NAICS Code	4 Brief des	4 Brief description of the character of business conducted in Rhode Island				
531120	REAL EST	REAL ESTATE MANAGEMENT				
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
11 BROADCOMMON ROAD, UNIT A			BRISTOL	RI	02809	
7. Mailing Address of Limite	d Liability Compa	ny and Name o				
Contact Name JACOB LEDSWORTH			Contact Title MEMBER			
Street Address 11 BROADCOMMON ROAD, UNIT A			City BRISTOL	State RI	<sup>Zip</sup> <b>02809</b>	
8. List ALL managers (nam	es and addresses	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<del>-</del>			Check the box to	indicate an attachment	
9. Resident Agent in Rhode	e Island. This inform	nation is currently	of record with the Department of S	tate. Changes require file	ing Form 642.	
Under penaity of perjury, statements, and that all s			examined this report, includi true and correct.	ing any accompanyi	ng schedules and	
Name of Authorized Persor	<u> </u>			Date	<i>i j</i>	
JACOB LEDSWORTH				1 91	11/19	
Signature of Authorized Pe	rson	810	SN DOCUMENT HERE			
1 Jun	6/2	016.	OCCUMENT HERE			

**FILED** 

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 1 6 2019

levised: 10/2017