

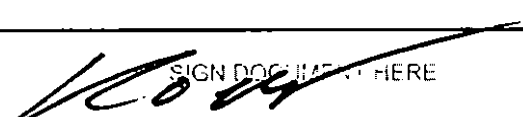


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED
OCT 04 2019
STAMP
00422

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.

1. Entity ID Number 001673920		2. Exact name of the Limited Liability Company 15 Lovegreen, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Own and manage Real Estate			
5. State of Formation Rhode Island					
6. Principal Office Address 116 Orange Street		City Providence		State RI	Zip 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Keith O. Monchik		Contact Title			
Street Address 15 Lovegreen Lane		City East Greenwich		State RI	Zip 02818
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			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Keith O. Monchik				Date 9/25/19	
Signature of Authorized Person 					

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov