RI SOS Fi	iling Numbe	r: 201924446	6350 Date: 10/15/2019 4	1:00:00 PM		
	nd and Providen f. <b>State - Bu</b>		ices Division			
MONEY.	20			CII	.ED	
Annual Report for the ∟imited Liability Com	c year			FIL	בט	
<ul> <li>→ Filing period: September</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25</li> </ul>	ber 1 - Novem		ecember 1.	OCT 1	5 2019 1100 DS	
1. Entity ID Number 154849	I	2. Exact name of the Limited Liability Company Nason Square, LLC				
3. NAICS Code 531390	4. Brief de Land Dev	Brief description of the character of business conducted in Rhode Island     Land Development				
5. State of Formation RI						
6. Principal Office Address 28 Ridge Hill Road			City North Smithfield	State RI	Zip 02896	
7. Mailing Address of Limited	Liability Compa	any and Name o	r Title of Contact Person		<del>-</del>	
Contact Name Lucien E Benoit			Contact Title Manager	Contact Title Manager		
Street Address 28 Ridge Hill Road			City North Smithfield	State RI	Zip <b>02896</b>	
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Žip	City	State	Zip	
				Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode I	sland. This infor	mation is currently	of record with the Department of State.	Changes require filir	ng Form 642.	
Under penalty of perjury, I			examined this report, including a	ny accompanyin	g schedules and	

SIN LOCUMENT HERE

MAIL TO:

**Division of Business Services** 

Name of Authorized Person Lucien E Benoit

Signature of Authorized Person

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

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

10/9/2019