



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.

FILED
 OCT 30 2019
 BY 18716 DS

1. Entity ID Number 487916		2. Exact name of the Limited Liability Company RHODE ISLAND R.E.I.T., LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island Real estate management.			
5. State of Formation Rhode Island					
6. Principal Office Address c/o Restivo Monacelli, LLP, 36 Exchange Street		City Providence	State RI	Zip 02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Stephen J. DiGianfilippo, Esq.			Contact Title Attorney		
Street Address 50 Park Row West, Suite 111		City Providence	State RI	Zip 02903	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Donna M. Rizzo		Manager Name			
Street Address 101 Plaza Real South, Apartment 308 902		Street Address			
City Boca Raton	State FL	Zip 33432	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.					
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 Donna M. Rizzo				Date 10-19-19	
Signature of Authorized Person		SIGN DOCUMENT HERE			

MAIL TO:
Division of Business Services
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