

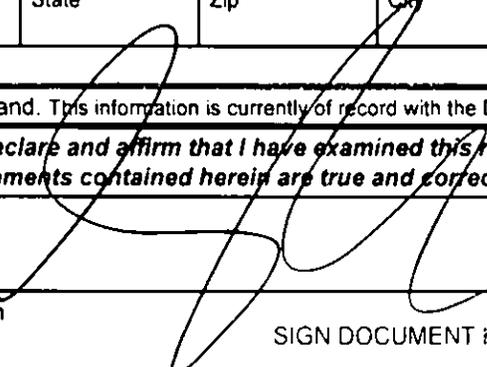


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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
 NOV 04 2019
 1023

1. Entity ID Number 001687770		2. Exact name of the Limited Liability Company 468 WEST FOUNTAIN LLC			
3. NAICS Code 236110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE RENTALS			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 36 EXCHANGE TERRACE		City PROVIDENCE	State RI	Zip 02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name EDMUND A. RESTIVO, JR.			Contact Title MEMBER		
Street Address 36 EXCHANGE TERRACE		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		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 EDMUND A. RESTIVO, JR.				Date 10-31-19	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov