RI SOS Filing Number: 201927291830 Date: 11/7/2019 4:00:00 PM



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	STAMP
NOV 0.7 2019	S OF ONE STATE

1 Entity ID Number		2. Exact name of the Limited Liability Company					
000076037	Amal	Amalgamated Financial Equities I, LLC					
3 NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island					
531120	Developm	Development of Real Estate					
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zıp		
1414 Atwood Avenue			Johnston	RI	02919		
7. Mailing Address of Limite		any and Name o					
Contact Name Kelly Coates			Contact Title Authorized	Contact Title Authorized Trustee			
Street Address 1414 Atwood Avenue			City Johnston	State RI	^{Zıp} 02919		
8. List ALL managers (nam	es and addresse	s) of the Limited	Liability Company. IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address		Street Address	Street Address				
City	State	<i>7</i> ıp	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Ζιρ	City	State	Zıp		
····		1		Check the box to	indicate an attachment		
9. Resident Agent in Rhode	Island, This infor	mation is currently	of record with the Department of St	ale. Changes require fili	ng Form 642.		
Under penalty of perjury, statements, and that all s			examined this report, includi true and correct.	ng any accompanyir	ng schedules and		
Name of Authorized Person			Date	Date			
Kelly Coates			10/23/1	10/23/19			
Signature of Authorized Per	rson	sig	N DOCUMENT HERE				
pel/4 c	4						
	_			-			

MAIL TO:

Division of Business Services

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

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