RI SOS Filing Number: 201928978550 Date: 11/29/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2019 NOV 29 PM 1: 09

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	2. Exact name of the Limited Liability Company				
154497	3960POST ROAD, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531390	Real estate acquisition, management and renovations				
5. State of Formation	1				
Rhode Island					
6. Principal Office Address			City	State	Zip
3970 Post Road			Warwick	RI	02886
7. Mailing Address of Limited Li	ability Compan	y and Name or Tit			······································
Contact Name Cheryl Ruizzo			Contact Title Manager		
Street Address 3970 Post Road			City Warwick	State RI	^{Zip} 02886
8 List ALL managers (names a	and addresses)	of the Limited Lia	bility Company, IF APPLICA	ABLE - DO NOT LIST I	MEMBERS
Manager Name Thomas Defelice			Manager Name		
Street Address 3970 Post Road			Street Address		
City Warwick	State RI	Zip 02886	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
			_ -	Check the box to i	ndicate an attachment
Resident Agent in Rhode Isla	and. This informa	ition is currently of re	ecord with the Department of S	tate. Changes require filin	ng Form 642.
Under penalty of perjury, I de statements, and that all state	clare and affir	m that I have exa	mined this report, includi	ing any accompanyin	g schedules and
Name of Authorized Person Date					
Thomas L. DeFelice 11/15/19					5/19
Signature of Authorized Person					
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MA.	-	IV.

Division of Business Services

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

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

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FORM 632 - Revised: 10/2017