



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.

1. Entity ID Number 1659199		2. Exact name of the Limited Liability Company HEJMOE, LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Own Real Estate			
5. State of Formation Rhode Island					
6. Principal Office Address 57 Sachuest Way		City Middletown		State RI	Zip 02842
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kevin McMahon			Contact Title Manager		
Street Address 35 Touro Street			City Newport		State RI Zip 02840
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name SAME AS ABOVE			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.					
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 <i>Kevin McMahon</i>				Date <i>11/28/19</i>	
Signature of Authorized Person <i>[Signature]</i>					

FILED

NOV 29 2019

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov

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