S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street Providence RI 02904-2615			
HOPE	(401) 222-30		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR: 2020			
1. ID No. <u>001681072</u>			
2. Exact Name of the Limited Liability Company <u>HDLENTERPRISE, LLC</u>			
3. State of Formation			
State: MA			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>531110</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in	Rhode Island
AN INVESTMENT PROPERTY OF A 2 FAMILY DWELLING			
5. Principal Office Addre	SS		
No. and Street: <u>108/110 NORTH MAIN ST</u>			
City or Town:MANSFIELDState: MAZip: 02048Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>ROSEMARIE SIROIS</u> Contact Title: <u>OWNER</u>			
	BYFIELD ST ISTOL State: RI	Zip: <u>02809</u> Cour	ntry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, 2	Zip Code, Country
MANAGER	ROSEMARIE SIROIS	34 BYFIELI BRISTOL, RI 02809	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MATTHEW D. SLEPKOW 1481 WAMPANOAG TRAIL EAST PROVIDENCE, RI 02915

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of January, 2020 at 12:04:22 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ROSEMARIE SIROIS

Signature of Authorized Person

Form No. 632 Revised 09/07

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