	State of R Office of the Se			Fee: \$50.00
	Division Of B 148 W. F	usiness Servi River Street	ces	
HOPE	Providence F (401) 2	RI 02904-26 222-3040	15	
Limited Liability Company	,			
Annual Report Filing Period: September 1 - Nove	mber 1			
In accordance with R.I.G.L. 7-16-6 to file its annual report within thirty 16-66(b&c)) is subject to a penalty	(30) days after the time			
ANNUAL REPORT YEAR: 2020	<u>)</u>			
1. ID No. <u>000163037</u>				
2. Exact Name of the Limited	Liability Company <u>F</u>	ORTY 1° NO	ORTH, LLC	
3. State of Formation				
State: <u>RI</u>				
	ARTICI	LE III		
Enter the six digit NAICS Code the list of codes here. More inform		•	•	the entity. Download
<u>721110</u>				
4. Brief Description of the Cha	racter of the Business	Which is Ac	ctually Conducte	ed in Rhode Island
TO OPERATE A HOTEL, RE	SORT AND MARIN	A		
5. Principal Office Address				
No. and Street:351 THANCity or Town:NEWPOR	<u>MES STREET</u> <u>XT</u>	State: <u>RI</u>	Zip: <u>02840</u>	Country: <u>USA</u>
6. Mailing Address of Limited	Liability Company and	d Name or Ti	tle of Contact P	erson:
Contact Name:GEORGE W. MOOREContact Title:No. and Street:351 THAMES STREETCity or Town:NEWPORT		AUTHORIZED PERSON		
		State: <u>RI</u>	Zip: <u>02840</u>	Country: <u>USA</u>
7. Name and Address of Each DO NOT LIST MEMBERS	Manager of the Limite	ed Liability (Company, if App	licable.
Title	Individual Name			lress
	First, Middle, Last, Suffix	Ad	dress, City or Town, S	State, Zip Code, Country

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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

Signed this 11 Day of September, 2020 at 3:29:21 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 <u>RACHEL ROSSI</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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