



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2020

## 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 000086356		2. Exact name of the Limited Liability Company OPTIONS REALITY LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Buying and selling real estate.			
5. State of Formation RI					
6 Principal Office Address 1445 Wampanoag Trail, Suite 203		City East Providence		State RI	Zip 02915
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Patrick T. Conley		Contact Title Managing Member			
Street Address 1445 Wampanoag Trail, Suite 203, E		City East Providence		State RI	Zip 02915
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		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. The Resident Agent information currently of record with the RI Department of State is accurate. 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 Patrick T. Conley				Date September 21, 2020	
Signature of Authorized Person 					

FILED

SEP 25 2020

KM

BY

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## MAIL TO:

Division of Business Services

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