	State of Rhode Office of the Secreta		e: \$50.00
Division Of Business Services			
148 W. River Street			
	Providence RI 029 (401) 222-30		
(401) 222-3040			
Limited Liability Company			
Annual Report			
Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020			
<b>1. ID No.</b> <u>000117962</u>			
2. Exact Name of the Limited Liability Company BOVE WEST, LLC.			
3. State of Formation			
State: <u>RI</u>			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. 535311			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
OWNING RESIDENTIAL REAL ESTATE UNITS			
5. Principal Office Addre	SS		
No. and Street: <u>65 MEADOW STREET</u> UNIT A			
		: <u>RI</u> Zip: <u>02886</u> Country: <u>US</u>	A
		<u></u>	
6. Mailing Address of Lin	mited Liability Company and Name	e or Title of Contact Person:	
Contact Name: Contact Title:			
No. and Street: <u>65 MEADOW STREET, UNIT A</u>			
City or Town: WARV	<u>VICK</u>	State: <u>RI</u> Zip: <u>02886</u> Country: <u>L</u>	JSA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
i ille	First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Cou	Intry
MANAGER	ROBERT A BOVE	65 MEADOW STREET, UNIT A WARWICK, RI 02886- USA	

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

ROBERT A. BOVE 65 MEADOW STREET, UNIT A WARWICK , RI 02886

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

**Signed this 1 Day of October, 2020 at 3:00:25 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>ROBERT A. BOVE</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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