RI SOS Filing Number: 202062937610 Date: 10/6/2020 4:00:00 PM

6. Principal Office Address

Contact Name Kim Ellin

132 South Wheaton Avenue

State of Rhode Isl	of State - Business Services Division	
Annual Report for the year: 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.		FILED OCT 06 2020 BY
1. Entity ID Number	2. Exact name of the Limited Liability Company	
1672054	574 Main, LLC	
3. NAICS Code 531110 5. State of Formation RI	4 Brief description of the character of business conducte Real estate holding	ed in Rhode Island

City

Seekonk

Contact Title Member

	<u> </u>	
Streat Address 132 South Wheaton Avenue	City Seekonk State MA Zip 02771	
8. trist ALL managers (names and addresses) of the Limited Liab	nility Company, IF APPLICABLE - DO NOT LIST MEMBERS	
Manager Name None	Manager Name None	
Street Address	Street Address	
City State Zip	City State Zip	
Manager Name None	Manager Name None	
Street Address	Street Address	
City State Zip	City State Zip	

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 Kim Ellin

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

9-29-20

Check the box to indicate an attachment

Zip

02771

State

MA

Signature of Authorized Person/

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov