	State of Phode	eland	E \$50.00		
State of Rhode IslandFee:Office of the Secretary of State			Fee: \$50.00		
Division Of Business Services					
	148 W. River Street				
	Providence RI 02904-2615 (401) 222-3040				
HOPE	(401) 222-304	10			
Limited Liability Com	ipany				
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:	<u>2020</u>				
1. ID No. <u>001674185</u>					
2. Exact Name of the Limited Liability Company 6 Creek Lane, LLC					
3. State of Formation					
State: <u>RI</u>					
	ARTICLE III				
-	Code that best describes the primary e information on <u>NAICS</u> can be found		the entity. Download		
4 Brief Description of th	e Character of the Business Which	is Actually Conducte	d in Rhode Island		
		is Addainy Conducto			
OWN, LEASE, PURCHASE, SELL, OPERATE, IMPROVE OR OTHERWISE MAINTAIN REAL					
PROPERTY AND ALL OTHER LAWFUL PURPOSES PURSUANT TO RHODE ISLAND LAW.					
E Dringing Office Addre					
5. Principal Office Addre	55				
	SOUTH STREET				
City or Town:SHREWSBURYState: MAZip: 01545Country: USA					
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Pe	erson:		
Contact Name: Contact Title:					
No. and Street:142 TRANSIT STREETCity or Town:PROVIDENCEState: RIZip: 02906Country: USA			Country LICA		
City or Town: PRC		<u>RI</u> Zip: <u>02906</u>	Country: <u>USA</u>		
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab	ility Company, if App	icable.		
Title	Individual Name	Addr	ess		
	First, Middle, Last, Suffix	Address, City or Town, S			
MANAGER	REBECCA DUHAIME	148 SOL SHREWSBURY,	ITH STREET MA 01545 USA		

MANAGER	REBECCA DUHAIME MS	148 SOUTH STREET SHREWSBURY, MA 01545 USA
MANAGER	REBECCA DUHAIME MISS	148 SOUTH STREET SHREWSBURY, MA 01545 USA
		·
	RHODE ISLAND - DO NOT ALTER g of Form 642 - R.I.G.L. 7-16-11	
<u>FRANK A. LOMBARDI, I</u>	ESQUIRE 14 BREAKNECK HILL R	OAD SUITE 203 LINCOLN , RI 02865
9. This report must be ex	ecuted by an authorized person	pursuant to R.I.G.L. 7-16-66 (b).
signature of the individu acknowledgement of the individual's act and dee	al or individuals signing this ins signatory, under penalties of pe d or the act and deed of the com e electronic filing, in compliance <u>DI</u>	the authorized person. This electronic etrument constitutes the affirmation or erjury, that this instrument is that pany, and that the facts stated herein are with R.I. Gen. Laws § 7-16.
Form No. 632 Revised 09/07		