RI SOS Filing Number: 202064857970 Date: 10/8/2020 4:00:00 PM

<b>(B)</b>	State of Rhode Island  Department of S
	Department of S

## **Department of State - Business Services Division**

Annua	Report for the year:	2020
	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 001695620	2. Exact name of the Limited Liability Company MAPLEDALE LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531110	RENTALS AND LAND HOLDINGS					
5. State of Formation	1					
R.I.					٠.	
6. Principal Office Address			City	State	Zip	
2230 TEN ROD RD			EXETER	RI	02822	
7. Mailing Address of Limited Lia	•	any and Name or				
Contact Name DAVII) A. ALLEN			Contact Title MANAGER	Contact Title MANAGER		
Street Address 2230 TEN ROD RD			City EXETER	State RI	Zip 02822	
8. List ALL managers (names a	nd addresse:	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u>.                                    </u>		<del></del>	Check the box to i	indicate an attachment	
9. The Resident Agent information						
Under penalty of perjury, I ded statements, and that all states	lare and aff nents conta	īrm that I have e ined herein are	examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
DAVID A. ALLEN				9/23/20		
Signature of Authorized Person	es i	L				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov 2020 OCT 0 8 2020 V M

BY 119