RI SOS Filing Number: 202064588450 Date: 10/14/2020 3:06:00 PM

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:	2019
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.

					9. [F	
1. Entity ID Number 1341094	2. Exact name of the Limited Liability Company 5 Sylvan Rental, LLC					
3. NAICS Code 53 \ \ \ \ \	Brief description of the character of business conducted in Rhode Island Rental of Real Estate					
5. State of Formation RI				v		
6. Principal Office Address	City			State	Zip	
31 Eastmount Road			Medfield	MA	02052	
7. Mailing Address of Limited Li	ability Compa	iny and Name or			•	
Contact Name Christopher Bissa	Cont Cont			Contact Title Member		
Street Address 31 Eastmount Rd	t Rd		City Medfield	State MA	^{Z₁p} 02052	
8. List ALL managers (names a	ind addresse:	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST N	EMBERS	
Manager Name		Manager Name		R. I.		
Street Address		Street Address		13 15 15 15 15 15 15 15 15 15 15 15 15 15		
City	State	Zip	City	State	30 A B	
Manager Name			Manager Name □ □ □ □ □			
Street Address			Street Address		03	
City	State	Ζιρ	City	State	Zip	
			•	Check the box to in	dicate an attachment	
9. The Resident Agent informat	ion currently i	of record with the	RI Department of State is acc	curate, Changes require	filing Form 642.	
Under penalty of perjury, I de statements, and that all state				ing any accompanying	schedules and	
Name of Authorized Person			Date			
Christopher Bissada			9.30.200			
Signature of Authorized Person		Bissin	de			

MAIL TO:

Division of Business Services

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

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

A.A.3'. 00 FORM 632 - Revised: 08/2020