



State of Rhode Island
Department of State - Business Services Division

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FOR COUNTY OF STATE USE ONLY

Annual Report for the year: 2020
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.

1. Entity ID Number 000795524		2. Exact name of the Limited Liability Company SUFFOLK MANAGEMENT, LLC			
3. NAICS Code 541611		4. Brief description of the character of business conducted in Rhode Island MANAGING AND CONSULTING			
5. State of Formation Rhode Island					
6. Principal Office Address 23 Catherine Street			City Newport	State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Christopher T Fiumara			Contact Title Manager		
Street Address 300 A Street Suite 101			City Boston	State MA	Zip 02210
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Christopher T Fiumara			Manager Name		
Street Address 23 Catherine Street			Street Address		
City Newport	State RI	Zip 02840	City	State	Zip
Manager Name Maria A Fiumara			Manager Name		
Street Address 33 Sleeper Street			Street Address		
City Boston	State MA	Zip 02210	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Christopher T Fiumara				Date 10/7/2020	
Signature of Authorized Person					

MAIL TO:
 Division of Business Services
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