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FILED OCT 1 5 2020

Annual Report for the year: $\frac{2020}{}$ **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.

→ Penalty: Additional \$25.00	fee if form is no	ot filed by Decem	nber 1.	RY	0404	
1. Entity ID Number 116321	Exact name of the Limited Liability Company J. ROBERT PESCE II, LLC					
3. NAICS Code 531190	Brief description of the character of business conducted in Rhode Island real estate					
5. State of Formation RI						
6. Principal Office Address			City		State	Zip
1 Realty Way			East Providence		RI	02914
7. Mailing Address of Limited Lia	bility Company a	and Name or Title	of Contact Person			
Contact Name Gene M. Carlino			Contact Title Resident Agent/Attorney			
Street Address 1301 Atwood Avenue, Suite 215N			City Johnston		State RI	Z ^{IP} 02919
8. List ALL managers (names ar	nd addresses) of	the Limited Liabi	ility Company, IF APPLICA	BLE - D	O NOT LIST MEI	MBERS
Manager Name Gene M. Carlino			Manager Name			
Street Address 1301 Atwood Avenue, Suite 215N			Street Address			
City Johnston	State RI	^{Zip} 02919	City		State	Zıp
Manager Name			Manager Name			
-Street Address			Street Address			
City	State	Zip	City		State	Zıp
			- *	Che	ck the box to indic	cate an attachment
9. The Resident Agent information	on currently of re	cord with the RI [Department of State is acci	urate. Cl	nanges require fil	ing Form 642.
Under penalty of perjury, I dec statements, and that all statem				ng any a	ccompanying s	chedules and
Name of Authorized Person			Date			
Gene M. Carlino			10/2/20			
Signature of Asthorized Person	$\overline{}$				<u> </u>	

MAIL TO:

Division of Business Services

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

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