RI SOS Filing Number: 202066337650 Date: 10/15/2020 4:00:00 PM



Department of State - Business Services Division

	2020	
Annual Report for the year:		OCT 1 5 2020
Limited Liability Company		טיין אין אין אין אין אין אין אין אין אין

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	2. Exact nar	2. Exact name of the Limited Liability Company					
98639	NIANTIC P	NIANTIC PLACE, LLC					
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island					
531190	real estate	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 Limit		y and Name or Ti	tle of Contact Person	•			
Contact Name Gene M. Carlino			Contact Title Resident Agent/Attorney				
Street Address 1301 Atwood Avenue, Suite 215N			City Johnston	State RI	^{Zip} 02919		
		of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name Gene M. Carlino			Manager Name				
Street Address 1301 Atwood Avenue, Suite 215N			Street Address				
City Johnston	State RI	^{Zip} 02919	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	1	I		Check the box to	indicate an attachment		
9. The Resident Agent info	rmation currently of	record with the R	I Department of State is accu	urate. Changes requi	re filing Form 642.		
Under penalty of perjury, statements, and that all s			nmined this report, including and correct.	ng any accompanyi	ng schedules and		
Name of Authorized Person				Date	Date 10 /2 /20		
Gene M. Carlino	/			107	2/20		
Signature of Authorized P	erson	. Or	7				

MAIL TO:

Division of Business Services

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

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