RI SOS Filing Number: 202066337920 Date: 10/15/2020 4:00:00 PM



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

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.

	FILEDSTAMP
	OCT 1 5 2020 Q
3 <b>Y</b>	2464

1. Entity ID Number 153302	2. Exact name of the Limited Liability Company PRIMCO AETNA, LLC					
3. NAICS Code 531190	Brief description of the character of business conducted in Rhode Island real estate development					
5. State of Formation RI				٠		
6. Principal Office Address			City	State	Zip	
1 Realty Way			Fast Providence	RI	02914	
7. Mailing Address of Limited Lia	ability Compar	ny and Name or Tit	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	Z <sub>IP</sub> 02919	
8. List ALL managers (names a	nd addresses)	) 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	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	1	<b>i</b>		Check the box to	indicate an attachment	
9. The Resident Agent information	on currently of	record with the R	I Department of State is acci	urate. Changes requir	re filing Form 642.	
Under penalty of perjury, I dec statements, and that all stater				ng any accompanyir	ng schedules and	
Name of Authorized Person  Gene M. Carlino			Date 10/2/20			
Signature of Authorized Person	) La	(den	On	1		
	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