



State of Rhode Island

Department of State - Business Services Division

FILED

OCT 20 2020

BY

168 DS

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 001691755		2. Exact name of the Limited Liability Company Studio11, LLC			
3. NAICS Code 531190		4. Brief description of the character of business conducted in Rhode Island lessor of residential + other real estate			
5. State of Formation RI					
6. Principal Office Address 55 Memorial 36 KAY ST APT 8 BLVD		City NEWPORT	State RI	Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name KATHERINE W. NESBITT		Contact Title member			
Street Address 36 KAY ST APT 8		City NEWPORT	State RI	Zip 02840	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	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.					
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.					
Name of Authorized Person KATHERINE WEITZMAN NESBITT				Date 10/16/2020	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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