RI SOS Filing Number: 202066947110 Date: 10/20/2020 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

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.

OCT 2 0 2020
BY

						
1. Entity ID Number	2. Exact name of the Limited Liability Company					
1660385	35 Sloop LLC.					
3. MATCS Code	4. Brief description of the character of business conducted in Rhode Island					
	Purchasing, leasing, sale of real estate :					
5. State of Formation	1					
Rhode Island	1					
6. Principal Office Address			City	State	Zip	
66 Pavillon Avenue			Providence	RI	02905	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name David L. Piccoli, II			Contact Title Member			
Street Address 66 Pavilion Avenue			City Providence	State RI	^{Zip} 02905	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	Спу	State	Zip	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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				Date	Date	
David L. Piccoli, II				9/14/20		
Signature of Authorized Person A Court P						
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MAIL TO:

Division of Business Services

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

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