RI SOS Filing Number: 202069792140 Date: 10/26/2020 4:00:00 PM

State - Bus	siness Servic	on Divinian			
		es division			
Annual Report for the year: 2020				FILED	
Limited Liability Company → Filing period: September 1 - November 1 → Filing Fee: \$50.00			OCT 2 6 2020		
					.00 fee if form i
2. Exact na	2. Exact name of the Limited Liability Company				
Wickford L	Wickford Landings, LLC				
	Brief description of the character of business conducted in Rhode Island Ownership and management of real estate.				
		City	State	Zip	
201 Essex Road		North Kingstown	RI	02852	
	ny and Name or Ti				
Contact Name Daniel A. Di Saia		Contact Title Manager			
Street Address 201 Essex Road		City North Kingstown	State RI	^{Zip} 02852	
and addresses) of the Limited Lia	bility Company, IF APPLICABLE	E - DO NOT LIST	MEMBERS	
Manager Name Daniel A. Di Saia		Manager Name			
Street Address 201 Essex Road		Street Address			
State RI	Zip 02852	City	State	Zip	
Manager Name		Manager Name			
Street Address		Street Address			
State	Zip	City	State	Zip	
	<u> </u>		L Check the box to i	ndicate an attachment	
eclare and affir ements contain	m that I have exa led herein are try	mined this report, including a e and correct.	ny accompanyin	g schedules and	
Name of Authorized Person			Date		
Daniel A. Di Sala			October 7 2020		
1					
	pany er 1 - Novemb 00 fee if form i 2. Exact na Wickford L 4. Brief des Ownership Liability Compat a and addresses ia State State State tion currently of eclare and affire	pany er 1 - November 1 00 fee if form is not filed by Dec 2. Exact name of the Limited Wickford Landings, LLC 4. Brief description of the cha Ownership and management Liability Company and Name or Ti a and addresses) of the Limited Lia and State RI State Zip State Zip State Zip Colare and affirm that I have exact the contained herein are try According to the Limited Lia and Addresses are the colored with the RI colored and affirm that I have exact the colored are try According to the Limited Lia and Addresses are the colored with the RI colored and affirm that I have exact the colored are try According to the Limited Lia and Addresses are the colored with the RI colored and affirm that I have exact the colored are try According to the Limited Lia and Addresses are the colored with the RI colored and Affirm that I have exact the colored are the	pany er 1 - November 1 00 fee if form is not filed by December 1. 2. Exact name of the Limited Liability Company Wickford Landings, LLC 4. Brief description of the character of business conducted in Ownership and management of real estate. City North Kingstown Liability Company and Name or Title of Contact Person Contact Title Manager City North Kingstown and addresses) of the Limited Liability Company. IF APPLICABLE Manager Name Street Address State State Zip City Manager Name Street Address State State Zip City Manager Name Street Address State State Address State State Zip City Manager Name Street Address State State Address Anager Name Anage	pany er 1 - November 1 Of fee if form is not filed by December 1. BY 2. Exact name of the Limited Liability Company Wickford Landings, LLC 4. Brief description of the character of business conducted in Rhode Island Ownership and management of real estate. City North Kingstown Liability Company and Name or Title of Contact Person Contact Title Manager City North Kingstown State RI and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST Manager Name Street Address State Vip O2852 City State Manager Name Street Address State Check the box to it of the cord with the RI Department of State is accurate. Changes required and affirm that I have examined this report, including any accompanying tements contained herein are true and correct. Date October	

MAIL TO:

Division of Business Services

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

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