



State of Rhode Island and Providence Plantations
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.

STAMP
FILED

OCT 26 2020

BY

1. Entity ID Number 487916		2. Exact name of the Limited Liability Company RHODE ISLAND R.E.I.T., LLC	
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island Real estate management.	
5. State of Formation Rhode Island			
6. Principal Office Address c/o Restivo Monacelli, LLP, 36 Exchange Street		City Providence	State RI Zip 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Stephen J. DiGianfilippo, Esq.		Contact Title Attorney	
Street Address 50 Park Row West, Suite 111		City Providence	State RI Zip 02903
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name Donna M. Rizzo		Manager Name	
Street Address 901 East Camino Real Apt 6A		Street Address	
City Boca Raton	State FL	Zip 33432	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. 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 Donna M. Rizzo		Date 10-11-20	
Signature of Authorized Person <i>Donna M. Rizzo</i>		SIGN/DOCUMENT HERE	

MAIL TO:

Division of Business Services
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Website: www.sos.ri.gov