

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.

0 BY	CI 2 6 2020	

Entity ID Number	2. Exact nai	2. Exact name of the Limited Liability Company						
536135	BIN, LLC	BIN, LLC						
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island						
531390	to purchase	to purchase, own, sell, lease or develop real estate						
5. State of Formation								
Rhode Island								
6. Principal Office Address			City	State	Zip			
253 Main Street			East Greenwich	RI	02818			
7. Mailing Address of Limited		ny and Name or Ti						
Contact Name Christopher J. Biafore			Contact Title Attorney					
Street Address 253 Main Street			City East Greenwich	State RI	^{Zip} 02818			
		of the Limited Lia	bility Company, IF APPLICABL	E - DO NOT LIST	MEMBERS			
Manager Name Christopher J. Biafore			Manager Name					
Street Address 253 Main Street			Street Address					
City East Greenwich	State RI	Zip 02818	City	State	Zip			
Manager Name			Manager Name					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
	I	1		Check the box to i	indicate an attachment			
9. The Resident Agent inform	nation currently of	record with the R	Department of State is accura	ite. Changes requir	e filing Form 642.			
Under penalty of perjury, I statements, and that all sta			mined this report, including see and correct.	any accompanyin	g schedules and			
Name of Authorized Person	Date	Date						
Christopher J. Biafore				10/15/2	10/15/20			
Signature of Authorized Pers	son /				-			

MAIL TO:

Division of Business Services

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

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