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(BE)

State of Rhode Island

Department of State - Business Services Division

OCT 2 8 2020 Q

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.

Entity ID Number 156540	i	2. Exact name of the Limited Liability Company RICGS, LLC				
3. NAICS Code 531390	4 Brief de	4 Brief description of the character of business conducted in Rhode Island To own and lease commercial real estate.				
5. State of Formation	\longrightarrow					
Rhode Island						
6 Principal Office Address			City	State	Zip	
68 Cumberland Street			Woonsocket	RI	02895	
7 Mailing Address of Limiti	ed Liability Comp	any and Name o	r Title of Contact Person			
Contact Name Joseph P. Mazza, M.D.			Contact Title			
Street Address 68 Cumberland Street			City Woonsocket	State RI	Zip 02895	
	nes and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Strent Address			Stroet Address			
City	State	Zip	City	State	Ζιρ	
Macager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Z ₁ p	
	_			Check the box to	indicate an attachment	
			e RI Department of State is accu			
Under penalty of perjury, statements, and that all s	I declare and aft statements conta	firm that I have ined herein are	examined this report, including true and correct.	g any accompanyir	ng schedules and	
Name of Authorized Person				Date		
Joseph P. Mazza, M.D.	_					
Signature of Authorized Pe	tson					
	*			·		

MAIL TO:

Division of Business Services

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

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