(B)	State of Rhode Island
	State of Rhode Island Department of S

Department of State - Business Services Division

OCT 2 8 2020 OL

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	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	<u> </u>		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 Nemo				
Strent Address			Stroet Address				
City	State	Zip	City	State	Ζιρ		
Madager 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