	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet	
HOPE	(401) 222-30	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>000123648</u>			
2. Exact Name of the Limited Liability Company <u>155 PLEASANT STREET, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
-	Code that best describes the primary e information on <u>NAICS</u> can be found		the entity. Download
<u>531120</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducte	d in Rhode Island
ALL PROVISIONS SET OUT IN OPERATING AGREEMENT			
5. Principal Office Addre	SS		
	PLEASANT STREET /TUCKET Stat	e: <u>RI</u> Zip: <u>02860</u>	Country: <u>USA</u>
6. Mailing Address of Li	nited Liability Company and Name	or Title of Contact Pe	erson:
	ERNANDES Contact Title: MEMBE	<u>-R</u>	
City or Town: PAW	TUCKET Sta	e: <u>RI</u> Zip: <u>02860</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addr	
	First, Middle, Last, Suffix	Address, City or Town, S	tate, Zip Code, Country
8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

EDWARD F. GROURKE, ESQ. 24 SPRING STREET PAWTUCKET, RI 02860

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of October, 2020 at 8:55:39 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>NICKY FERNANDES</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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